

, rBOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL

HEALTH AND WELLBEING BOARD

Minutes of the Meeting held on 06 October 2025 at 2.00 pm

Present:-

Cllr D Brown – Chair

Present: Rob Carroll, Cllr R Burton, Karen Loftus, Betty Butlin,
Siobhan Harrington, Cllr S Moore, Rachel Gravett and Marc House

In
attendance
virtually: Cllr Keiron Wilson, Louise Bates, Ellie Lindop and Pam O'Shea

14. Apologies

Apologies were received from Aidan Dunn, Cathi Hadley, Dawn Dawson and David Freeman.

The Chair advised the Board that Patricia Miller had left her role at NHS Dorset and thanked her for her contributions to the Board. The Board was advised that a new Vice Chair would need to be elected at the next meeting.

15. Substitute Members

Rachel Gravett substituted for Cathi Hadley, Ellie Lindop substituted for Dawn Dawson and Pam O'Shea substituted for David Freeman.

Cllr Kieron Wilson, Louise Bates, Ellie Lindop and Pam O'Shea joined the meeting virtually forgoing the ability to vote on any matters arising.

16. Confirmation of Minutes

RESOLVED that the minutes of the Health and Wellbeing Board held on 9 June 2025 be confirmed as an accurate record and signed by the Chair, subject to the addition of the following attendees: Rob Carroll, Tim Branson, Ellie Lindop and Lizzy Warrington.

17. Declarations of Interests

There were no declarations of interest on this occasion.

18. Public Issues

There were no public issues on this occasion.

19. Bournemouth, Christchurch & Poole (BCP) Safeguarding Adults Board Annual Report 2024-2025

The Chair of the 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 requested that the report be presented to Scrutiny as the report enabled a discussion on the work of the Safeguarding Adults Board.

The attached report was for the year April 2024 to March 2025. The report was 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.

The Board was advised that the two separate Annual Reports were created, one for each of the Boards as they were separately constituted. Throughout 24-25, BCP SAB had delivered against all priorities which were set out in the annual work plan; the Annual Report summarised what the Board had achieved.

The Board discussed the report, including:

- The annual report detailing how the Safeguarding Adults Board fulfilled its responsibilities to prevent abuse, harm, and neglect of adults with care and support needs during 2024–25 was noted.
- Members highlighted the impact of including personal stories, such as a case that raised awareness of cuckooing, which was considered grounding and powerful.
- Assurance was given that working relationships between safeguarding and health colleagues across the system were strong.
- Two key achievements were commended: development and signing of a Memorandum of Understanding to address tensions between mental capacity and mental health legislation, and launch of training based on a safeguarding case study, which engaged hundreds of staff across the system.
- The comprehensive nature of the report was praised, including positive partner assurance, embedding of learning from Safeguarding Adult Reviews (SARs), and work on suicide prevention, hoarding, and violence against women and girls.
- Concerns were raised about safeguarding risks linked to increased digital access to health records and coercive control.
- Digital safeguarding risks were acknowledged, and it was suggested that this could be a focus for the next annual development day.

- The importance of community involvement and voluntary sector engagement in safeguarding, particularly in identifying cuckooing, was stressed.
- Commitment to community engagement and communication was reiterated, noting that increased safeguarding referrals indicated better public awareness.
- Observations were made regarding cuckooing not currently being illegal and the need for clarity on thresholds for coercive relationships, emphasising multi-agency communication.
- Board Members agreed that safeguarding was everyone's business and supported ongoing strategies for engagement and learning dissemination, including seven-minute learning tools.

RESOLVED that the Board Members note 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 2024-2025.

Voting: Nem. Con.

20. BCP Safeguarding Children Partnership Annual Report 2024/2025

The BCP Safeguarding Children Partnership 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.

The report for the period April 2024-March 2025 set out that since the dissolution of the 'Pan-Dorset Safeguarding Children Partnership', the new BCP Safeguarding Children Partnership had focussed on implementing new arrangements to fulfil the statutory responsibilities of the three statutory safeguarding partners who had joint responsibility and accountability for the multi-agency safeguarding arrangements in the BCP geographical area.

The three statutory safeguarding partners were BCP Council, NHS Dorset ICB and Dorset Police. Within this period of significant change, partners had maintained a focus on safeguarding children and through the new arrangements had gained insights on the effectiveness of how well partners worked together to safeguard local children and young people, and areas to be developed. Full details of the multi-agency safeguarding arrangements could be seen [here](#).

The report provided an account of:

- What had been done as part of our local arrangements, including any child safeguarding practice review
- Impact of learning from local and national reviews
- How we had applied independent scrutiny to review and challenge our safeguarding practice
- How education partners were engaged with
- Future improvements that could be made as to the effectiveness of local safeguarding arrangements.

The report would be submitted to the Child Safeguarding Practice Review Panel by 30 September 2025 and would be published on the BCP Safeguarding Children Partnership website.

The Board discussed the report, including:

- A Board Member highlighted that reading the report was emotionally challenging, with particular concern expressed over child deaths and the prevalence of domestic abuse and exploitation.
- The importance of community awareness was emphasised, and a personal experience of reporting suspected abuse was shared.
- The breadth of the report was appreciated, and a query was raised regarding the use of the Child Exploitation Risk Assessment Framework (CERAF) across NHS partners, with gaps identified.
- It was confirmed that CERAF was in use but not yet fully embedded. Plans for independent peer review were outlined to strengthen its application.
- The report was praised for being well-written, and the value of case reviews in making the content relatable was highlighted.
- The importance of self-awareness within the partnership was noted, and a question was raised about the benefits of transitioning to a localised BCP Safeguarding Children Partnership.
- It was explained that the localised approach allowed better focus on urban challenges such as neglect, exploitation, knife crime, and county lines. Plans for improved communication and resource allocation were described.
- Formal thanks were expressed for work undertaken during the transition from Pan-Dorset to BCP arrangements, with progress acknowledged under challenging circumstances.

RESOLVED that the establishment of the new BCP Safeguarding Children Partnership, the multi-agency safeguarding arrangements in place, identification of its effectiveness to date and areas to be developed are to be noted by the Board.

21. Better Care Fund 2025-2026 Quarter 1 Report:

The Commissioning Manager 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.

NHS England (NHSE) required the Health and Wellbeing Board (HWB) to approve all BCF plans, this was one of the national conditions within the Policy Framework. This included planning documents at the beginning of a funding period, and template returns reporting progress against the plans quarterly.

The report provided an overview of the Quarter 1 Report of the Better Care Fund (BCF) for 2025-26.

The BCF was a key delivery vehicle in providing person-centred integrated care with health, social care, housing, and other public services, which was fundamental to maintaining a strong and sustainable health and care system.

The report was a part of the requirements set by the Better Care Fund 2025-26 Policy Framework. The report must be jointly agreed and signed off by the Health and Wellbeing Board as one of the planning requirements.

The Board discussed the report, including:

- Members acknowledged the extensive work involved in delivering the Better Care Fund (BCF) across the system, covering over 50 schemes.
- The complexity of managing BCF funding was highlighted, along with expected national changes, including potential links to health neighbourhoods and alignment with the NHS 10-year plan.
- The importance of responding collectively to the forthcoming national consultation on BCF was stressed, particularly to protect key areas such as intermediate care.
- The inclusion of voluntary sector examples in the presentation was welcomed, and the need for objective data to track progress against targets for future reports was emphasised.
- Support was expressed for the point on data, and local charities and community groups were praised, with the Prama Walking Group cited as an example of impactful volunteering.
- It was shared that volunteering initiatives had saved the NHS nearly £500,000 by supporting safe hospital discharges and reducing readmissions.
- An offer was made to share a short film highlighting the value of volunteering, which had been shown at the Integrated Care Board.

ACTION.

- Members noted the significant scale of BCF delivery, with approximately £80 million funding around 50 schemes, representing a major partnership effort between NHS, local authorities, and the voluntary sector.
- Positive examples were discussed, including: same day emergency care improvements, voluntary sector involvement in hospitals and transfer of care hubs, access wellbeing and its role in supporting health workers and social workers and lifeline technology service supporting hundreds of people weekly.

RESOLVED that the Health and Wellbeing Board retrospectively approve the Better Care Fund 2025-26 Quarter 1 Report.

Voting: Nem. Con.

22. Pharmaceutical Needs Assessment

The Director of Public Health, Specialist Registrar in Public Health and Senior Public Health Analyst 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 Bournemouth, Christchurch and Poole (BCP) Health and Wellbeing Board, and the Dorset Health and Wellbeing Board, were both required to publish a Pharmaceutical Needs Assessment (PNA) every three years. A new PNA had been developed as a single document covering both areas as agreed during transition and was scheduled for publication in October 2025.

The Steering Group reviewed current population needs, future population growth, and current pharmaceutical services. They concluded that, although there had been changes since the last PNA, these were unlikely to significantly affect access to, or the provision of, pharmaceutical services. Therefore, no gaps in pharmaceutical service provision had been identified.

The Steering Group now sought approval from the Health and Wellbeing Board to proceed with publication of the new PNA.

A statutory consultation was carried out to support the development of the PNA. Consultation responses were considered, and where appropriate, amendments were made to the PNA (see Appendix 1 to the report).

The Board discussed the report, including:

- Members reviewed the Pharmaceutical Needs Assessment (PNA) draft and acknowledged its comprehensive scope.
- The board noted the statutory requirement to publish the PNA every three years.
- It was highlighted that the PNA informed commissioning decisions and supported the provision of pharmaceutical services.
- The board discussed the engagement process, including consultation with stakeholders and the public.
- Members recognised the importance of aligning the PNA with local health priorities and population needs.
- The Board acknowledged the inclusion of data on access to pharmacies, opening hours, and service availability.
- It was confirmed that the draft PNA had undergone scrutiny and quality assurance processes.

RESOLVED that the Board:

- **Note the outcome of the consultation**
- **Approve the new Pharmaceutical Needs Assessment for publication by October 2025.**

Voting: Nem. Con.

23. BCP Health and Wellbeing Board Strategy (Draft)

The Director of Public Health & Communities, Deputy Director of Modernisation & Place, NHS Dorset and Head of Communities, Partnerships and Community Safety 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 report and associated documents provided an update on the progress towards the development of the Health and Wellbeing Board Strategy for the Bournemouth, Christchurch and Poole area, a draft strategy for comments and considerations from the Board and proposals for further stakeholder engagement on the strategy prior to finalisation.

The Board discussed the Strategy, including:

- Members noted the timeliness of the draft strategy and acknowledged the absence of a timeline initially, which was later included.
- It was emphasised that a workshop and co-production were essential due to significant changes across the NHS and broader systems.
- The strategy was recognised as critical for guiding the Health and Wellbeing Board's role in future neighbourhood plans and collaborative working.
- The importance of sense-checking the strategy through the upcoming workshop was reiterated.
- The draft was generally well received, with minimal additional comments due to prior feedback opportunities.
- Members supported the principle of co-production and appreciated the inclusion of complementary current strategies.
- It was agreed that the strategy must remain flexible to adapt to evolving strategic directions.
- Support was expressed for the Poverty Truth Commission and its principles, acknowledging their relevance to the strategy.
- Members endorsed the draft strategy's ability to reflect broader systemic changes, including the national 10-year health plan.
- The previous workshop on health inequalities and access was referenced as a valuable foundation for ongoing strategy development.
- It was noted that not all Board Members were aware of the proposed date for the workshop and the Director of Public Health advised that he would ensure all members were given the details. **ACTION.**

RESOLVED that the Board:

- 1. Note the progress made to date with the development of the draft strategy and approve further engagement with stakeholders.**
- 2. Approve that the Strategy comes back to the Health & Wellbeing Board in January 2026 for approval.**

Voting: Nem. Con.

24. Work Plan

The Chair highlighted the items due to come to the Board at its next meeting.

A Board Member shared a lived experience regarding the Steps to Wellbeing service, where the individual was left without support and faced a seven-month waiting list. Following this, the individual contacted NHS Dorset, the commissioning body, to suggest improvements to the service's email communication. It was noted that the original email did not reference the Access Wellbeing hubs available across Dorset. NHS Dorset agreed to update the email to include information about local hubs in Poole, Boscombe, and other areas. The Chair and Board acknowledged the positive outcome resulting from the shared experience and the resulting improvement in service communication.

25. Dates of future meetings

The dates of future meetings were noted.

The meeting ended at 4.05 pm

CHAIR