

BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL
HEALTH AND WELLBEING BOARD

Minutes of the Meeting held on 12 January 2026 at 2.00 pm

Present:-

Cllr D Brown – Chair

Mark Harris – Vice-Chair

Present: Aidan Dunn, Rob Carroll, Laura Ambler, Pete Browning, Mark Harris, Ellie Lindop, Cllr Richard Burton, Karen Loftus, Betty Butlin, Rachel Gravett, Zena Deighton and Cllr Sandra Moore.

Also in attendance: Lizzy Warrington joined virtually.

26. Apologies

Apologies for absence were received from Marc House, Cathi Hadley, Dawn Dawson and Siobhan Harrington.

Post meeting note – apologies were also received from Louise Bate but clerk advised after the meeting.

27. Substitute Members

Rachel Gravett substituted for Cathi Hadley, Ellie Lindop substituted for Dawn Dawson and Lizzy Warrington substituted for Siobhan Harrington on this occasion.

28. Election of Vice Chair

RESOLVED that Mark Harris, Deputy Director of Modernisation & Place, NHS Dorset be elected as the Vice Chair of the Health and Wellbeing Board for the remainder of the 2025/2026 Municipal Year.

29. Confirmation of Minutes

The Minutes of the Board meeting held on 6 October 2026 were confirmed as accurate and signed by the Chair.

30. Declarations of Interests

There were no declarations of interest on this occasion.

31. Public Issues

There were no public issues received on this occasion.

32. FutureCare Programme – Mid-Programme Review

The Director of Adult Social Care and the Programme Director - FutureCare Programme 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 purpose of the Report was to update the Health and Wellbeing Board on progress with the FutureCare Programme. The FutureCare Programme was a Dorset-wide programme aimed at delivering better health and care outcomes for residents and in particular reducing the time people spend in hospital waiting to be discharged, or in hospital if support could be provided at home.

Significant challenges still exist in increasing flow and reducing the No Criteria to Reside (NCTR) and the average length of stay (ALoS) for residents in the East of the County. However, overall, the Futurecare Programme was on track to deliver its anticipated benefits, and robust plans were in place to address challenges.

For BCP Council positive long-term benefits were now beginning to be delivered with positive operational and cumulative benefits delivered in November as home-based intermediate care effectiveness and throughput increased.

A mid-programme review had been undertaken and this identified that significant benefits were being delivered for residents:

- 80 more people per week, or more than 4000 per year were being referred to Same Day Emergency Services (SDEC) as an alternative to hospital admission;
- The number of referrals into long term residential and nursing care placements from acute hospitals had reduced by 20% and from intermediate care beds by 30% since the beginning of the programme;
- Each week at least 40 people, or more than 2000 per year, were returning home from an intermediate care bed in Dorset at least one week sooner than at the beginning of the programme (ALoS reducing from 38.2 days at the beginning of the programme to 33.9 days at the beginning of December);
- At Dorset County Hospital, patients waiting for a supported discharge were waiting 1.5 days less to receive a package of care than at the beginning of the programme.

In addition to focusing on delivering improvements in the East of the county, work was now underway to prepare a business case to support the reduction of intermediate care beds. Advice and engagement remained ongoing with NHSE regarding the best approach to changes in this area, and a proposal for the process and configuration of beds would be

presented to BCP Council, NHS Dorset and other partner organisations in the New Year.

Overall, at the beginning of October the programme was on track against its operational benefits trajectory, delivering a projected £12.87m of annual operational benefits, against a target of £12.54m.

The Board discussed the report, including:

- The significant efforts and infrastructure from programme team, system partners, and strategic partner were highlighted and praised.
- It was noted that the programme would help to focus on embedding outcomes into business as usual for sustainability, including home-based intermediate care.
- Consideration needed to be given to benchmarking opportunities and integration with community and primary care initiatives.
- Emphasis was placed on ensuring internal organisational infrastructure, particularly around digital and informatics, to maintain progress post programme.
- In response to a query regarding any negative impact the difficult winter had had on the programmes trajectory, the Board was advised that the situation had been closely monitored and that the FutureCare programme had supported data analysis and identification of hotspots, complementing business as usual while driving forward sustainable transformation.
- The Board was also advised that additional capacity was commissioned by health partners and adult social care to tackle the winter pressures which demonstrated great partnership working and alongside the programme created positive and tangible outcomes.
- In response to a query regarding the differences shown between the outcomes for different hospitals, the Board was advised that the success at Dorset County Hospital (DCH) was attributed to earlier implementation on a smaller scale, with plans to replicate at University Hospitals Dorset (UHD). The contextual differences between hospitals were highlighted, including factors such as population, bed numbers, and new hospital models.
- The Chair noted the BBC report on NHS discharge challenges and agreed strong local partnership working was a positive indicator for future outcomes.

RESOLVED that the Board:

- 1. Recognises the progress that the programme continues to make in respect of improved outcomes for people and the delivery of financial benefits to the Dorset Integrated Care System**
- 2. Notes that more work is required to reduce the average length of time people spend in hospital waiting for a care package.**

Voting: Nem. Con.

33. Better Care Fund 2025-26 Quarter 2 Report

The Commissioning Manager and Senior Lead - Operations, NHS Dorset presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'B' to these Minutes in the Minute Book.

The report provided an overview of the Quarter 2 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:

- A Board Member welcomed the report and noted strong performance against targets for several indicators.
- Concerns were raised about emergency hospital admissions for people aged 65 plus and the need to focus on understanding causes and improving prevention.
- It was highlighted there were high admissions related to falls and drugs/alcohol use and again emphasis was placed on upstream prevention and data analysis. The Director of Public Health offered support from his team to review data and assist with prevention planning.
- The Board was advised of the challenges in hospitals locally with managing respiratory infections and oxygen needs in the community were highlighted.
- In response to the query about fall related admission rates, the Board was advised that Dorset Healthcare and Urgent Community Response (UCR) teams work with care homes and provided a 24/7 support line to Care Home Managers to reduce incidents.
- There was some further discussion about the prevention strategy and the need for joined up working across all partners to realise impactful outcomes in reducing and avoiding unnecessary admissions.
- The Director of Public Health raised a point about hospital admissions in last 12 months of life despite advanced care plans and the potential need to support teams to manage more end of life care in the community, according to individuals wishes and to reduce unnecessary and unwanted admissions to hospital.

- There was some discussion over the uncertainty of funding in the future and the potential impact of rolling the BCF into the revenue support grant. Members agreed to monitor guidance and advocate for prevention funding alignment with NHS 10-year plan.
- A Board Member highlighted the mental health discharge and flow summit as an upcoming event to ensure joined-up approaches across services.

RESOLVED that the Health and Wellbeing Board retrospectively approve the Better Care Fund 2025-2026 Quarter 2 Report

Voting: Nem. Con.

34. Integrated Care Board (ICB) Medium Term Plan

The Deputy Director of Modernisation & Place and Deputy Director of Performance and Planning, NHS Dorset provided a verbal update accompanied by a presentation which included details regarding:

- Provided an overview of the national planning requirements focussing on Five Year Commissioning Plan including neighbourhood health plan
- Shared initial contents and progress to date
- Confirmed next steps.

The Board discussed the presentation, including:

- A Board Member highlighted the need to ensure wider partner engagement in commissioning intentions, particularly when considering place-based working and to avoid gaps in consultation.
- The importance of aligning commissioning intentions with future care programme and integrated neighbourhood teams was noted.
- It was highlighted that time constraints and late guidance had limited engagement opportunities, but that dialogue with partners would continue. The deadline for signing off was not flexible as it was set by NHS England, but it was agreed that discussions around joint working arrangements and commissioning intentions could be considered prior to that date.
- A Board Member from the voluntary sector highlighted the support they had been providing for the plan and expressed concern at the pace in which NHS England were expecting plans to be signed off.

The Chair thanked the Deputy Director of Modernisation & Place and Deputy Director of Performance and Planning for their update.

35. Update on the Adult Social Care Prevention Strategy

The Strategic Commissioning Manager – Prevention and Wellbeing presented a report, a copy of which had been circulated to each Member

and a copy of which appears as Appendix 'C' to these Minutes in the Minute Book.

The Adult Social Care Prevention Strategy (2025-2030) was approved at Cabinet on 29 October 2025 and sets out five key strategic priorities to reduce, delay or prevent the need for long term care and support for people living in Bournemouth, Christchurch and Poole.

The strategy had been shaped by the views and experiences of local people, carers, the voluntary and community sector and partners. It aimed to develop a sustainable approach to prevention in adult social care. The strategy emphasised early intervention, the promotion of wellbeing, and collaboration with key partners, to not only prevent the development of long-term needs, but also to enhance the overall quality of life for people living in the BCP Council area.

The Board discussed the report and presentation, including:

- A Board Member commended the clarity and accessibility of the prevention strategy and praised the work involved.
- The importance of aligning preventative contracts with the Better Care Fund (BCF) and Integrated Care Board (ICB) commissioning intentions was highlighted.
- In response to a query, it was anticipated that the progress and governance of the strategy implementation would report to the Health and Adult Social Care Overview and Scrutiny Committee and the Health and Wellbeing Board.
- Use of the Dorset Intelligence and Insight Service (DiiS) was commended, using predictive analytics and rich data to strengthen prevention efforts.
- The opportunities for joining up co-production work across the neighbourhood health programme and adult social care were highlighted.
- The Board noted approval of funding and stressed importance of early intervention to sustain services and promote independence.
- The strategy was recognised as being beneficial beyond adult social care, supporting wider council priorities such as community resilience and reducing isolation.

RESOLVED that the Board note the content of the report.

Voting: Nem. Con.

36. BCP Joint Health and Wellbeing Strategy Draft for Consultation

The Director of Public Health and Communities 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 'D' to these Minutes in the Minute Book.

1. This report and associated documents provides;
 - An update on the development of the BCP Joint Health and Wellbeing Strategy for the Bournemouth, Christchurch and Poole area
 - An updated draft of the BCP Joint Health and Wellbeing Strategy (version 2) for public consultation
 - A draft Joint Strategic Needs Assessment (JSNA) Forward Plan for 2026 and 2027 for additional comments

The Board discussed the report, including:

- A Board Member supported the updated draft of the health and well-being strategy and noted its usefulness, however raised concerns about the consultation process and the need for a clear press release was emphasised.
- The formal consultation included use of a new digital platform, to engage with registered residents, and outreach to key stakeholders. It was also confirmed that involvement of trusted voices and community champions to gather feedback through multiple channels would be used and not limited to online forms.
- The Chair highlighted the consultation as an opportunity to raise awareness of the Council's role in health and well-being and to promote positive engagement.

RESOLVED that the Board:

- **Note the progress made to date with the development of the draft Strategy.**
- **Approve the draft Strategy for public consultation.**
- **Note a new requirement to develop a Neighbourhood Health Plan by the end of March 2026.**
- **Note the suggested priority topics for the BCP Joint Strategic Needs Assessment (JSNA) Forward Plan and provide any additional comments.**

Voting: Nem. Con.

37. Health Literacy Update and Proposal

The Public Health Consultant 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 purpose of the report was to provide members of the BCP Health and Wellbeing Board with an overview of the activity delivered to date to increase 'organisational health literacy' across BCP and Dorset.

It asked the Board to confirm health literacy as a system priority and requests nominations for a co-design workshop to develop a proposal for scaling up 'organisational health literacy' across BCP and Dorset.

The Board discussed the report, including:

- The Director of Adult Social Care highlighted the need for co-production and where this could be really targeted and mentioned the Learning Disability Partnership Board as a good forum for that work to take place.
- A concern was raised about jargon and acronyms; with the need for plain language in communications to increase accessibility and understanding for all.
- A Board Member requested the work with health literacy be linked with existing campaigns such as 'Language that Cares', which was recently launched within Children's Services.
- The links between health literacy, digital exclusion, and prevention strategies were noted and the need to embed principles across the transformation work was highlighted.
- The importance of consistency in terminology and engagement with education and community partners was acknowledged.

The Chair confirmed that any interested leads should contact the Public Health Consultant to progress.

RESOLVED that BCP Health and Wellbeing Board:

- **Confirm health literacy as a system priority.**
- **Nominate leads to participate in a workshop to co-design a proposal for a BCP and Dorset wide approach to scaling up 'organisational health literacy' for the Neighbourhood Health Programme Board to consider, or an alternative decision making body.**

Voting: Nem. Con.

38. Work Plan

The Chair highlighted the items due to come to the March meeting.

The Director of Adult Social Care highlighted the need to add the CQC Assurance visit outcome and it was also noted that the NHS Strategic Commissioning Plan and Neighbourhood Health Plan needed to be add for consideration at the next Board meeting.

The meeting ended at 4:05pm.

CHAIR