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HEALTH AND WELLBEING BOARD

MINUTES OF MEETING HELD ON WEDNESDAY 12 JANUARY 2022

Present: Cllrs Rebecca Knox (Chairman), Forbes Watson (Vice-Chairman), Vivienne Broadhurst, Sam Crowe, Marc House, Spencer Flower, Tim Goodson, Margaret Guy, Martin Longley, Patricia Miller, John Sellgren, Peter Wharf, Simon Wraw and Claire Shiels

Apologies: Scott Chilton and Dani Farrell

Also present: Cllr Cherry Brooks and Cllr Jane Somper

Officers present (for all or part of the meeting):

Paul Beecroft (Communications Team), Andrew Billany (Corporate Director of Housing, Dorset Council), Kate Calvert (Deputy Director Primary and Community Care, Dorset CCG), Lesley Hutchinson (Corporate Director for Adults Commissioning), Matt Prosser (Chief Executive), Sarah Sewell (Strategic Commissioning Lead), Rosie Sharpe (PA to Consultants) and Fiona King (Senior Democratic Services Officer)

41. Apologies

Apologies for absence were received from Dr Dani Farrell and Scott Chilton.

42. Declarations of Interest

No declarations of disclosable pecuniary interests were made at the meeting.

43. Public Participation

There were no statements or questions from Town and Parish Councils or members of the public.

44. Questions from Members

There were no written questions received from members.

45. Better Care Fund Plan 2021/22

Members considered a report which set out the Better Care Fund (BCF) Plan 2021/22 for approval by the Board as this was one of the national conditions within the Policy Framework.

Officers also provided members with a presentation to accompany the report which is attached as an annexure to these minutes.

Areas of discussion/questions

The Plan had been approved by senior DC and CCG officers.

In respect of maintaining independence, how well developed was this and could assistive technologies be used more widely? This was another enabler for keeping people at home more. Colleagues were looking into the digital offer which was an area for further development. A change of contracting providers in this area was currently taking place.

Although a number of areas within the report were familiar it could be useful to consider spending time on getting behind the scenes e.g. Home First. There were opportunities to use the Place Based Partnerships to look into more of the detail in the headline areas. More of a strategic conversation to join up the dots was suggested.

In respect of Home First, Healthwatch Dorset were about to start gathering feedback from carers. There would also be a report on Home First and Sufficiency at the People and Health Scrutiny Committee on 31 January 2022.

It would be helpful to know how many people were in the system, those being helped not to enter the acute system and those being helped to discharge. How and where did the performance information sit? Identifying areas where the Board was in a position to assist would be useful. A number of data sources were highlighted. The Corporate Director for Commissioning undertook to look to provide this information outside of the meeting. In respect of data this was currently sat at local authority level but the Deputy Director of Primary and Community Care, Dorset CCG undertook to speak to business and intelligence colleagues to see how much further this could be interrogated. The Interim Executive Director for People, Adults noted the importance of having the conversation about what was being put in place. Funding needed to be in preparation for what needed to be impacted in Place.

The community support in the Plan was highlighted but it was felt more about voluntary support could be added.

The definition of what the BCF was using as a locality – was this part of the Place conversation? Possibly an informal discussion for the Board would be helpful. It would be useful to have the context of what was delivered through the BCF for instance in respect of older people.

There were currently some very 'hot' issues in the system as a result of workforce pressures etc. Real significant pressures in the community care system were highlighted.

The system health inequalities group could support the work under the BCF in reducing health inequalities.

Reference was made to all three hospitals in the Dorset and BCP area and how they were currently running at 100%.

Conscious of great initiatives taking place although a key failure did seem to be around communication and reference was made to a recent experience of a failed discharge.

In respect of lessons to be learned for improvement, the importance of listening to people's experiences was highlighted to ensure services worked better. The Interim Executive Director for Adults, People highlighted that this happened in her directorate on a case by case basis in a multi disciplinary way. It was considered if feedback could be gained through the PPGs.

Reference was made to interviewing patients at home for use as learning exercises for staff and a similar approach to discharges could be considered.

The importance of ensuring that the right schemes were in place for young people entering adulthood and the opportunity for Children's Services to extend the conversation was highlighted.

Data sharing was key. The use of trusted networks and agencies was an opportunity to gain honest feedback. It was important to recognise the voice of the community.

It was felt there was still room for some improvement in the BCF.

'Minded to' Decisions

That the Health and Wellbeing Board supported the following recommendations:-

1. That the Better Care Fund Plan for 2021/22 be approved.
2. That the Board receives an update report on progress to date at the March and November 2022 meetings
3. That delegated authority to approve subsequent plans if a Health and Wellbeing Board meeting cannot be convened within the NHS England sign off period, to the Executive Director for Adult Care and Housing following consultation with the Health and Wellbeing Board Chair be given.

The Interim Executive Director of People, Adults, having heard the debate, confirmed the 'minded to' Recommendations, under delegated powers on behalf of the informal meeting of the Health and Wellbeing Board.

46. Forward Plan

The Board considered its Forward Plan.

For the 30 March meeting the current Safe and Legal item would now be a discussion on Place.

The Chairman drew members' attention to the Health and Wellbeing Strategy which members approved in March 2021. The 3 priorities in the strategy were highlighted and an action plan item would be brought forward,

The Chairman advised she would email members to ask them to look through the strategy and see what they might be in a position to fulfil. This would then inform discussions on Place and ICS work.

It was noted that an Integrated Care Strategy (ICS) would need to be drafted shortly and it might be worth considering just having the one strategy that incorporated both areas. However, the Chairman was concerned that having just the one might not include all that is contained in the HWB Strategy.

47. Urgent items

There were no urgent items of business.

48. Exempt Business

There was no exempt business.

Duration of meeting: 2.00 - 3.13 pm

Chairman

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Health & Wellbeing Board

12th January 2022

Better Care Fund 2021/22

Sarah Sewell – Strategic Commissioning Lead, Adult Social Care Commissioning, Dorset Council
Kate Calvert - Deputy Director Primary & Community Care, Dorset NHS CCG

Recommendations

As outlined in the report:

1. To approve the Better Care Fund Plan for 2021/22
2. To agree to receive an update report on progress to date at the March and November 2022 meetings
3. To agree delegated authority to approve subsequent plans if a Health and Wellbeing Board meeting cannot be convened within the NHS England sign off period, to the Executive Director for Adult Care and Housing following consultation with the Health and Wellbeing Board Chair.

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Submission of Plans and Current Position

- Dorset submitted 2021/22 BCF Plan and supporting narrative document on 16 November 2021, as required by NHSE.
- Due to NHSE delays in publishing 2021/22 planning requirements, this did not allow time for submission to HWB in advance. However, NHSE accepted Plans with provision HWB meeting was set, hence our meeting today.
- Dorset's Plan was approved Senior Council and CCG Officers:
 - Council Chief Executive
 - Section 151 Officer
 - Director for Adult Social Care
 - CCG Accountable Officer
 - CCG Lead Officer
- On 22 December the South West Better Care Fund Manager confirmed that all South West submissions (including Dorset's) meets the National Conditions and Planning Requirements and has been recommended for approval (pending HWB sign off today)
- The final stage is for approval at a NHSE Executives meeting in January – we await the outcome from this session.

Headlines for BCF Planning

- The BCF and iBCF provides Dorset with a total pooled budget of £136,827,560.
- The BCF Policy Framework sets out four national conditions that we must meet and evidence:
 - A jointly agreed plan between local health and social care commissioners and signed off by the Health and Wellbeing Board
 - NHS contribution to adult social care to be maintained in line with the uplift to CCG minimum contribution
 - Invest in NHS commissioned out-of-hospital services
 - Plan for improving outcomes for people being discharged from hospital
- In addition, national metrics are included that we must report on:
 - Effectiveness of reablement
 - Discharge to normal place of residence
 - Avoidable Admissions
 - Older adults whose long-term care needs are met by admission to residential or nursing care per 100,000 population

Improving Outcomes for People being Discharged from Hospital

- The reporting is themed by 'Schemes' – the following is not an exhaustive list but provides some examples, there is more information within the Narrative Paper:

Scheme Name	Examples of some of the services that BCF funding supports
Maintaining Independence	Dorset Accessible Home Service provision of Assistive Technologies and Equipment Adaptations, including statutory Disabled Facilities Grants Occupational Therapy Service
Moving on from Hospital Living	Pooled budget to support LD cohort to live in community
Supported Hospital Discharge	Integrated Health and Social Care Team Integrated crisis and rapid response service* Social Work staffing capacity Provision of reablement services – Tricuro
Strong and sustainable care markets	Health and Social care funding of domiciliary care & residential placements * e.g. Dorset Care Framework
Integrated health and social care locality teams	Community services and intermediate care services via Integrated Community Response Teams District nursing capacity to support locality working

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N.B

* Inflationary uplift was applied to these areas for 2021/22

- Spend allocated to these areas can be found in the BCF Plan Template – please note there may be additional funding streams supporting this activity – reported figures are solely BCF/iBCF contribution to expenditure / service provision

Other Dorset Priorities supported by BCF

Scheme Name	Descriptions
Strong and sustainable care markets	Resource to manage and review care market Enabling service improvement
Carers	Carers Case workers, Carers training, Direct Payments for Carers Respite and Short Breaks,

Metrics Reported on for BCF

- **Avoidable Admissions**

(unplanned hospitalisation for chronic ambulatory care sensitive conditions)

- **Length of Stay (Hospital)**

- **Discharge to normal place of residence**

(Percentage of people, resident in the HWB area, who are discharged from acute hospital to their normal place of residence)

- **Residential Admissions**

(Long-term support needs of older people (age over 65 and over) met by admission to care homes per 100,000 population)

- **Reablement**

(Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement)

Where We Report and Governance in Dorset?

- **Quarterly national reporting is recommencing**
(halted due to Covid-19 pressures March 2020)
- **Joint Commissioning Group**
(BCP Council, Dorset Council and NHS Dorset CCG)
- **Reporting to Health and Wellbeing Board on activity and financial performance will commence in March 2022 and every six months thereafter**