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HEALTH AND WELLBEING BOARD

MINUTES OF MEETING HELD ON WEDNESDAY 24 SEPTEMBER 2025

Present: Cllr Steve Robinson (Chair), Cllr Gill Taylor, Sam Crowe, Margaret Guy, Rachel Partridge and Jonathan Price,

Present remotely: Paula Bennetts and Marc House

Apologies: Cllr Clare Sutton, Jan Britton, Paul Dempsey and Stewart Dipple

Also present: Cecilia Bufton

Also present remotely: Cllr Chris Kippax

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

George Dare (Senior Democratic and Governance Officer), Jane Horne (Consultant in Public Health), Ross Bowell (Head of Service - Health, Education & SEND Commissioning), Sue Evans (Head of Specialist Services), Sarah Howard (Deputy Director of Modernisation and Place), Sarah Sewell (Head of Service - Commissioning for Older People and Home First) and Dave Thorp (Thriving Communities Partnership Manager)

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

15. **Minutes**

The minutes of the meeting held on 18 June 2025 were confirmed and signed.

16. **Declarations of Interest**

There were no declarations of interest.

17. **Public Participation**

There was no public participation.

18. **Councillor Questions**

One question was received from Cllr C Jones, with a verbal response given by the Deputy Director of Modernisation and Place, NHS Dorset. The question and response are attached as an appendix to these minutes.

19. **Urgent items**

There were no urgent items.

20. **Work Programme**

The Board noted its work programme and that it could be subject to change.

21. **FutureCare Programme Update**

The Head of Specialist Services and the Head of Commissioning for Older People introduced the report and gave a presentation, updating on the progress of each FutureCare workstream. Multi-agency Transfer of Care Hubs had been set up by Dorset County Hospital and University Hospitals Dorset, enabling earlier discharges from hospital. The average hospital stay reduced until June, but then increased during the summer before starting to fall again. Progress had been made in the number of people accessing reablement, and reducing the length of stay in bed-based intermediate care.

Board members were pleased to see early progress with the programme and the chair was impressed by the Transfer of Care hub, although noted it would be challenging to maintain the culture it needs.

The use of a reablement app was a good example of how technology can be used. Patients could create goals with care workers and these goals and their progress were tracked through the app.

A member highlighted a voluntary sector market stall event where agencies advertised their current projects, such as FutureCare, to small voluntary organisations. The event was well received and had a good turnout.

The Board recognised the progress that the programme has made in respect of improved outcomes for people and financial benefits. The Board reaffirmed its support for the programme.

22. **Better Care Fund: Quarter 1 Template 2025/26**

The Head of Commissioning for Older People introduced the report and gave a presentation on the Better Care Fund Quarter 1 Template, which is attached to these minutes. It was expected that the Government would reform the Better Care Fund policy over the next year to align with the NHS 10 Year Plan. The Dorset Better Care Fund was already aligned to the expected priorities and work had started on preparing next year's plan. No new money was expected for the Better Care Fund, so some money may need to be released for re-investment.

There were no comments from members.

Proposed by Jonathan Price, seconded by Cllr S Robinson.

Decision:

That the Better Care Fund Quarter 1 Reporting Template for 2025/26 be endorsed.

23. Pharmaceutical Needs Assessment

The Specialist Registrar in Public Health introduced the Pharmaceutical Needs Assessment (PNA) which was a statutory requirement for Health & Wellbeing Boards to produce every 3 years. It served as a tool to regulate market entry. A public consultation was undertaken which resulted in amendments being made to the draft Pharmaceutical Needs assessment. Supplementary statements could be issued if further changes needed to be made. Following previous agreement from the Board, the PNA covers both the Dorset and BCP Council areas.

Board members discussed the report and raised the following points:

- The PNA should be amended to reflect the disaggregation of Public Health Dorset and the clustering of Integrated Care Boards.
- Some changes cannot be included in the PNA because they have not happened, such as housing development.
- Pharmacies closing could cause disruption for people, however the PNA needed to be produced in compliance with guidance which may not take closures into account.
- A report on community pharmacies could be brought to a future meeting, due to their importance in prevention and intervention.

Proposed Jon, seconded Gill. Agreed subject to amendment Margaret picked up on.

Proposed by Jonathan Price, seconded by Cllr G Taylor.

Decision

That:

1. The outcome of the consultation be noted.
2. The Pharmaceutical Needs Assessment be approved for publication by October 2025, subject to amendments on changes to public health and Integrated Care Board structures.

24. Thriving Communities

The Deputy Director of Public Health introduced the item and the Thriving Communities Programme Manager gave a presentation, which is attached to these minutes. The presentation outlined the benefits that Thriving Communities would deliver for the voluntary sector and older people in Dorset and how it would deliver the benefits.

Board Members thanked the Thriving Communities Programme Manager for the work put into the project. It had potential to significantly improve the way the council worked with the voluntary sector. It enabled the council to work with the voluntary sector in new ways, which it has not done before.

A member highlighted how Thriving Communities was a good example for outcome-based commissioning, ensuring that the intended outcomes are considered during the commissioning progress.

The Board endorsed the Thriving Communities work and development of the foundation phase, and agreed to an update report and recommendations following the first-year evaluation.

25. Age Friendly Communities

The Executive Director of People – Adults and Housing introduced the Age-Friendly Communities report. It built upon existing communities work, such as Thriving Communities and also involved town and parish councils. The report sought support from the Health and Wellbeing Board ahead of consideration by Cabinet.

Board members were supportive of the initiative and felt it would be transformational for working across directorates and going beyond equality towards equity.

A member expressed how Age-Friendly Communities could be used to encourage people into work and for them to develop new skills.

The Board supported the recommendations set out in the report:

- i) To endorse Dorset's application for Age Friendly accreditation by the World Health Organisation (WHO).
- ii) To support the integration of Age-Friendly principles into health, care & community wide planning.
- iii) To promote collaborative delivery through place-based partnerships and VCSE engagement.

26. Developing a Health and Wellbeing Strategy

The Director of Public Health introduced the report on developing a new Health and Wellbeing Strategy following the Integrated Care Partnerships (ICP) being disbanded. A strategy would consider a framework for how the Health and Wellbeing Board could provide strategic leadership of place-based work in the Dorset Council area. The strategy could also consider the work already completed to form the ICP Strategy. In addition to the strategy, there would be a need for a place-based partnership under the Health and Wellbeing Board.

Board members discussed the report and raised the following points:

- An ambition was to make the Health and Wellbeing Board a focal point for sectors to convene in a strategic place.
- Ensuring that businesses, universities, and the skills voluntary sector were included in developing the strategy.
- There was an important need to maintain input and the footprint of the Dorset Council place, following the clustering of Integrated Care Boards in 2026.
- There was an ambition to include 'community' in the strategy.

Proposed by Cllr S Robinson, seconded by J Price.

Decision:

1. That the formation of a task and finish group, be approved, formed from representatives of organisations who contributed to the development of the place-based prospectus earlier this summer, to co-design a process that can be used to develop and deliver a refreshed strategy for approval by the Board.
2. That the strategy process should consider evidence arising from the planned development session on Joint Strategic Needs Assessment, and insight gathered from various engagements with communities and residents.
3. That the group should also consider and incorporate the previous work on identifying priorities for the Integrated Care Partnership, bearing in mind the requirement for the board to develop a neighbourhood health plan.

27. Exempt Business

There was no exempt business.

Duration of meeting: 2.00 - 3.28 pm

Chairman

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Health and Wellbeing Board - 24 September 2025

Questions from Councillors

Question 1, submitted by Cllr Carole Jones

- The South West Regional Health Conference focusing on children and young people.
- The Government's Ambition is for this to be the healthiest generation.
- Over-arching aim for the NHS to move from treatment to prevention.
- Justin Varney-Bennett, SW Regional Director Public Health and Senior Policy Advisor to the Department of Health, talked about the South West being THE region for teenagers. He said if you ask teenagers how they feel, their response isn't great. He believes there needs to be more physical activity and improved diets and nutrition.

In the Minehead area the PCN is working with the local secondary schools to target school absences. They are taking a health based approach, so that when a young person starts being absent from school (they didn't actually give a threshold but persistent absenteeism is 10% or more of sessions missed) the first intervention is by health. A GP appointment is made in order to explore any medical/health reason as to why the young person isn't attending school. Out of 15 pupils seen by this process 7 are back in full-time education, 1 has been provided a place in specialist education and the others are continuing to be supported.

This was a new approach and has only been running for about a year but is clearly having some success. It also goes to show GP surgeries working in a multi-disciplinary way in partnership with other agencies in the community.

Can we in Dorset please look at replicating this in our area?

Transcript of the response from Deputy Director of Place and Modernisation, NHS Dorset

I managed to get hold of the GP in Somerset and she shared the presentation with me, and she'd be happy for us to follow up with a conversation, but I also reached out to our Primary Care Network (PCN) colleagues. I was really pleasantly surprised to hear that there's an awful lot of work going on, particularly from a social prescribing perspective. So, for children and young people there are social prescribers going into schools, supporting children and young people. That's happening in a number of PCN areas. They aren't necessarily focussing on those young people that are absent. However, those kids that are kind of in and out of

school, they are focusing on. But I think it's something we can absolutely pick up in terms of a follow up conversation, both in terms of hearing more from what's going on, but also pulling a few willing people around the table to have a conversation about how we might develop something similar.

Dorset Health & Wellbeing Board

24th September 2025

Dorset's Better Care Fund

Retrospective Endorsement of:

- Quarter 1 2025/26 BCF Reporting Template

Dorset's Better Care Fund

Looking ahead

Q1 2025/26 Template

- 2025/26 BCF contains c£156m expenditure across Health and Social Care
- Appendix A is Dorset's 2025/26 Q1 Template, submitted to NHSE on 15th August 2025, reporting our performance at the end of Quarter 1 against our initial plan.
- The template has been streamlined but mirrors previous submissions. We reported as follows:

Metric / Measure	Q1 Performance
Emergency Admissions	On track
Discharge Delays	On track
Residential Admissions	On track
Q1 Expenditure	In line with plan

- Opportunity to update metrics mid-year if necessary

Nationally

- BCF Policy will be reformed from next year, aligning to the priorities 10-year Health Plan,
- Focus will be on ensuring consistent joint NHS and LA funding for essential integrated health and social care services e.g. hospital discharge, intermediate care, rehab & reablement
- Closer links with Integrated Neighbourhood Teams is anticipated
- We await further sharing of finer details from BCF National Team

In Dorset

- Dorset is already well aligned to expected priorities, with joint work already started on developing Dorset's 2026/27 BCF Plan.
- We are not expecting new BCF money; we will need to release money for re-investment – which will take time.
- It is likely longer-term plans beyond 26/27 will be needed to bring existing 'additional contribution' scheme lines into core BCF investment.

Recommendation to HWB Today

As outlined in the report:

1. To endorse the Better Care Fund (BCF) Reporting Template for Quarter 1 2025/26; approved under delegated authority

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A stronger and more sustainable Voluntary, Community and Social Enterprise Sector (VCSE)

Pivotal partners in health and care transformation

Research and Engagement



- Reference Group
- National to local
- Community focus
- Evidence based
- VCSE
- Collaborative engagement



Thriving Communities



*"Who is going to take over
when we're too old to do it?
All our volunteers are in their
70's....People will be very
lonely".*

Volunteer

*"Think about the
loneliness and it's not
just in rural
communities, where is
the care for people
who are alone? People
I see could sit in their
homes for weeks on
end and no-one would
care"*

Volunteer

Collaborative Engagement

*"There is a need for
joined up thinking, with
everyone involved
working together for the
best plan". This should
be statutory bodies,
healthcare, family, and
the voluntary sector."*

Volunteer

*As a village hall
charity, we are
trying to put on
events in order that
people don't have
to travel."*

*"..always
remember that
the person you
are helping has
a younger
person at their
heart.."*

Volunteer

*"By working together, we are
able to develop our services
and deliver so much more,
making a positive difference
to our environment and
people's lives."*

VCSE CEO



*"Working in partnership with other local support and care
organisations appears to have been pivotal in successfully
delivering support to the local community. This
collaboration has resulted in multiple benefits."*

Cornwall Community Hubs Evaluation Report

What will Thriving Communities deliver for the VCSE and Older People in Dorset



- A new, simple way of funding the VCSE
- Reduced bureaucracy
- Improved VCSE sustainability
- Simplified communication across sectors
- Simplified processes and procedures
- Improved connectivity
- Better understanding
- Learning and sharing best practice
- Using trusted people
- Using trusted places
- Volunteer retention, succession and support
- Better, simpler partnership working
- The ability to respond in volume
- Scalability

Growth in community based preventative
health and care support



Thriving Communities



How Thriving Communities “Proof of Concept” will be delivered

- ☐ VCSE led
- ☐ 2 Year contract
- ☐ Place based
- ☐ 3 networks
- ☐ Core cost grants
- ☐ Partnerships
- ☐ Linked to INTs, Future Care, and Age Friendly
- ☐ Networking
- ☐ Joint training
- ☐ Peer mentoring
- ☐ Action Plans
- ☐ Performance measurements
- ☐ Reviews
- ☐ Evaluation
- ☐ Oversight

Delivering Thriving Communities for Older People in Dorset

AIM:

A **Thriving Communities Network** model led by the VCSE, supported by a partnership of Dorset Council, NHS Dorset, and other partners.

A network coordinated by the VCSE to strengthen delivery of health and wellbeing services at a community level.



ACHIEVED:

Marie Waterman, Chief Executive of Volunteer Centre Dorset:

“We’re proud to be leading the first phase of the Thriving Communities Network in Dorset. This is about more than just funding—it’s about supporting the people and groups already making a difference in their neighbourhoods.

By working together, we can create local networks that are responsive, resilient, and rooted in the strengths of each community.”