Public Document Pack

Health and Wellbeing Board

Date: Wednesday, 19 November 2025
Time: 2.00 pm
Venue: Council Chamber, County Hall, Dorchester, DT1 1XJ

Members (Quorum: 5)
Steve Robinson (Chair), Clare Sutton, Gill Taylor, Paula Bennetts, Jan Britton, Sam Crowe, Paul Dempsey, Stewart Dipple, Margaret Guy, Marc House, Sarah Howard, Martin Longley, Jonathan Price and Simone Yule

Chief Executive: Catherine Howe, County Hall, Dorchester, Dorset DT1 1XJ

For more information about this agenda please contact Democratic & Governance Services Meeting Contact 01305 224185 - george.dare@dorsetcouncil.gov.uk

Members of the public are welcome to attend this meeting, apart from any items listed in the exempt part of this agenda. If you would like to attend this meeting and have any specific requirements please contact the Democratic Services Officer named above.

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Agenda

Item **Pages**

1. APOLOGIES

To receive any apologies for absence.

2. MINUTES

To confirm the minutes of the meeting held on 24 September 2025.

3. DECLARATIONS OF INTEREST

To disclose any pecuniary, other registrable or non-registrable interest as set out in the adopted Code of Conduct. In making their disclosure councillors are asked to state the agenda item, the nature of the interest and any action they propose to take as part of their declaration.

If required, further advice should be sought from the Monitoring Officer in advance of the meeting.

4. PUBLIC PARTICIPATION

Representatives of town or parish councils and members of the public who live, work, or represent an organisation within the Dorset Council area are welcome to submit either 1 question or 1 statement for each meeting. You are welcome to attend the meeting in person or via Microsoft Teams to read out your question and to receive the response. If you submit a statement for the committee this will be circulated to all members of the committee in advance of the meeting as a supplement to the agenda and appended to the minutes for the formal record but will not be read out at the meeting. The **first 8 questions and the first 8 statements received from members of the public or organisations for each meeting will be accepted on a first come first served basis in accordance with the deadline set out below.** For further information read Public Participation - Dorset Council

All submissions must be emailed in full to george.dare@dorsetcouncil.gov.uk by 8.30am on Friday, 14 November 2025.

When submitting your question or statement please note that:

- You can submit 1 question or 1 statement.
- a question may include a short pre-amble to set the context.
- It must be a single question and any sub-divided questions will not be permitted.
- Each question will consist of no more than 450 words, and you will be given up to 3 minutes to present your question.
- when submitting a question please indicate who the question is for (e.g., the name of the committee or Portfolio Holder)
- Include your name, address, and contact details. Only your name will be published but we may need your other details to contact you about your question or statement in advance of the meeting.
- questions and statements received in line with the council's rules for public participation will be published as a supplement to the agenda.
- all questions, statements and responses will be published in full within the minutes of the meeting.

5. COUNCILLOR QUESTIONS

To receive questions submitted by councillors.

Councillors can submit up to two valid questions at each meeting and sub divided questions count towards this total. Questions and statements received will be published as a supplement to the agenda

and all questions, statements and responses will be published in full within the minutes of the meeting.

The submissions must be emailed in full to george.dare@dorsetcouncil.gov.uk by 8.30am on Friday, 14 November 2025.

Dorset Council Constitution – Procedure Rule 13

6. URGENT ITEMS

To consider any items of business which the Chairman has had prior notification and considers to be urgent pursuant to section 100B (4) b) of the Local Government Act 1972. The reason for the urgency shall be recorded in the minutes.

7. WORK PROGRAMME 5 - 8

To note the Health and Wellbeing Board work programme.

8. FUTURECARE PROGRAMME UPDATE

To consider a report by the FutureCare Programme Director.

9. BETTER CARE FUND 2025-26 Q2 REPORTING TEMPLATE 9 - 20

To consider a report by the Head of Service – Commissioning for Older People and Home First.

10. DORSET SAFEGUARDING ADULTS BOARD ANNUAL REPORT 21 - 62

To consider a report by the Independent Chair of the Dorset Safeguarding Adults Board.

11. COMMUNITY PHARMACY UPDATE 63 - 66

To receive a report by the Community Pharmacy Clinical Lead, NHS Dorset.

12. EXEMPT BUSINESS

To move the exclusion of the press and the public for the following item in view of the likely disclosure of exempt information within the meaning of paragraph x of schedule 12 A to the Local Government Act 1972 (as amended). The public and the press will be asked to leave the meeting whilst the item of business is considered.

There are no exempt items scheduled for this meeting.

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Health and Wellbeing Board
Work Programme

Meeting Date: 19 November 2025

Report Title	Description	Lead Officer	Cabinet Member(s)	Other Information
FutureCare Programme Update	Progress update on the FutureCare programme.	Dylan Champion – FutureCare Programme Director	Cllr Steve Robinson – Cabinet Member for Adult Social Care	
Better Care Fund Quarterly Reporting Template	Endorsement of the Better Care Fund quarterly reporting template.	Sarah Sewell, Head of Service for Older People, Home First, and Market Access	Cllr Steve Robinson – Cabinet Member for Adult Social Care	
Dorset Safeguarding Adults Board Annual Report	Review and feedback on the annual report		Cllr Steve Robinson – Cabinet Member for Adult Social Care	
Community Pharmacy Update		Fiona Arnold – Community Pharmacy Clinical Integration Lead		

Meeting Date: 11 February 2026

Potential Item	Description	Lead Officer	Cabinet Member(s)	Other Information
Towards a new model of day opportunities	Feedback following consultation	Sarah Perrett Karen Stephens	Cllr Steve Robinson – Cabinet Member for Adult Social Care	

Meeting Date: 18 March 2026

Report Title	Description	Lead Officer	Cabinet Member(s)	Other Information
FutureCare Programme Update	Progress update on the FutureCare programme.	Dylan Champion – FutureCare Programme Director	Cllr Steve Robinson – Cabinet Member for Adult Social Care	
Better Care Fund Quarterly Reporting Template	Endorsement of the Better Care Fund quarterly reporting template.	Sarah Sewell, Head of Service for Older People, Home First, and Market Access	Cllr Steve Robinson – Cabinet Member for Adult Social Care	
National Neighbourhood Implementation Programme		Sarah Howard – Deputy Director of Modernisation and Place		
Place Based Partnership	Approval of the final Place Based Partnership Prospectus	Sam Crowe – Director of Public Health and Prevention	Cllr Steve Robinson – Cabinet Member for Adult Social Care	

Meeting Date: Unscheduled items

Potential Item	Description	Lead Officer	Cabinet Member(s)	Other Information
Thriving Communities – 1 year evaluation				Autumn 2026

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Health and Wellbeing Board

19 November 2025

Better Care Fund in Dorset: Quarter 2 Template 2025/26

For Decision

Cabinet Member:
Cllr S Robinson, Adult Social Care

Local Councillor(s):
All

Senior Leadership Team:
J Price, Executive Director of People - Adults

Report author and job title: Sarah Sewell, Head of Service for Commissioning for Older People and Home First
Email: sarah.sewell@dorsetcouncil.gov.uk

Statutory Authority:

Report status: Public Choose an item.

Executive summary (maximum of 500 words)

1. This report seeks approval from the Health and Wellbeing Board for endorsement of the Better Care Fund Quarterly Reporting Template.

2. **Recommendation(s)**

2.1 To endorse the Better Care Fund (BCF) Reporting Template for 2025/26 Quarter 2; approved under delegated authority

3. **Reason for the recommendation(s)**

- NHS England (NHSE) require the Health and Wellbeing Board (HWB) to approve all BCF plans, this is one of the national conditions within the Policy Framework. This includes planning documents at the beginning of a funding period, and template returns reporting progress against the plans mid-year, and at the end of the year.

- There is usually a relatively short window of time between NHSE publishing the reporting templates and the submission date. NHSE allow areas to submit their plans under delegated authority, pending HWB approval. At the HWB meeting on 12 January 2022 delegated authority to approve BCF plans, if a HWB meeting could not be convened within the NHSE sign off period, was granted to the Executive Director for People – Adults, following consultation with the HWB Chair.
- The 2025/26 Quarter 2 (Q2) template submitted for endorsement today was shared with HWB Members by email on 31st October 2025, in advance of submission to NHSE to provide advance oversight and offer opportunity to comment; no comments or amendments were returned.
- Submission of the template was made to NHSE on 11th November 2025 on behalf of Dorset Council and Dorset NHS in line with delegated approvals. Retrospective endorsement is now sought from the Board at its meeting on 19 November 2025.

Report:

The Quarter 2 Performance

2.1 The Q2 template is at Appendix A and reports performance against the original plan submitted for 2025-26. The template format is in line with previous formats. The template required the following updates:

- Confirmation that National Conditions are being implemented
- Progress against the BCF Metrics, including an assessment of whether we are on track to meet the goals
- Summary of Q2 year to date expenditure against the plan with opportunity to provide narrative.

2.2 Our performance has been challenged during Q2. We are on track to meet two out of three goals, with the Discharge Delays metric ‘not on track’ at the end of Q2.

2.3 However, there is active work in train via the Future Care Programme which is focussed in reducing the length of stay for people ready to leave hospital (known as those with ‘no criteria to reside’), and so at this stage in the year, confidence remains that we will improve upon current performance.

2.4 Within the Future Care Programme, the work to address discharge delays forms part of the Transfers of Care (TOC) workstream. There are three key area of focus:

- Improving early discharge planning.
- Bringing decision making into one place where multi agency teams work together to increase efficiency around discharge planning.
- Improving how we record and track what is happening for people requiring care and support to leave hospital so we have greater clarity on what actions are needed to enable people to get home.

2.5 In relation to Q2 expenditure, we remain in line with our plan, and we had no changes to report.

3. **Financial Implications**

3.1 The Council and Dorset NHS are required to work within the financial envelope and to Plan, hence continuous monitoring is required. Joint commissioning activity and close working with System partners, including Acute Trusts, allow these funds to be invested to support collective priorities for Dorset.

4. **Natural Environment, Climate and Ecology Implications.**

4.1 All partner agencies are mindful in their strategic and operational planning of the commitments, which they have taken on to address the impact of climate change.

5. **Well-being and Health Implications**

5.1 Allocation of the BCF supports individuals with health and social care needs, as well as enabling preventative measures and promoting independence.

5.2 Dorset, like many other areas across the South West and nationally, is continuing to experience many challenges in providing and supporting the delivery of health and social care. For Dorset, the highest risks continue to be the increasing acuity of health, care and support needs of those being supported both in the community and in hospital. In addition the lack of therapy led care and support to promote the regaining and maintaining of longer term independence continues to challenge us.

6. **Other Implications**

6.1 Dorset Council and Dorset NHS officers will continue to work closely with Dorset System Partners to plan measures to protect local NHS services, particularly around admission avoidance and hospital discharge to ensure flow is maintained to support and respond to additional demand.

7. **Risk Assessment**

7.1 Dorset Council and Dorset NHS officers are confident the report appendices provide appropriate assurance and confirms spending is compliant with conditions.

7.2 The funds provide mitigation of risks by securing continuation of essential service provision and provides preventative measures to reduce, delay and avoid demand.

7.3 Dorset is actively working to alter approaches that enable enhancement of provision to mitigate risks, and promote recovery, regaining and maintaining of independence.

8. Impact Assessment

8.1 It is important that all partners ensure that the individual needs and rights of every person accessing health and social care services are respected, including people with protected characteristics so the requirements of the Equalities Act 2010 are met by all partners.

9. Appendices

A: Dorset's Better Care Fund 2025-2026 Quarter 2 Template

10. 10. Background Papers

Better Care Fund policy framework 2025 to 2026 - GOV.UK

Health & Wellbeing Board, 24th September 2025 Better Care Fund Q1 Template report.pdf

Health & Wellbeing Board, 18 June 2025,BCF 2024-25 Q2 report.pdf

Report sign-off

11.1 This report has been through the internal report clearance process and has been signed off by the Director for Legal and Democratic (Monitoring Officer), the Executive Director for Corporate Development (Section 151 Officer) and the appropriate Portfolio Holder(s)

HM Government

NHS England

Better Care Fund 2025-26 Q2 Reporting Template

2. Cover

Version 1.0

Please Note:

- The BCF quarterly reports are categorised as 'Management Information' and data from them will be published in an aggregated form on the NHSE website. This will include any narrative section. Also a reminder that as is usually the case with public body information, all BCF information collected here is subject to Freedom of Information requests.

- At a local level it is for the HWB to decide what information it needs to publish as part of wider local government reporting and transparency requirements. Until BCF information is published, recipients of BCF reporting information (including recipients who access any information placed on the BCE) are prohibited from making this information available on any public domain or providing this information for the purposes of journalism or research without prior consent from the HWB (where it concerns a single HWB) or the BCF national partners for the aggregated information.

- All information will be supplied to BCF partners to inform policy development.

- This template is password protected to ensure data integrity and accurate aggregation of collected information. A resubmission may be required if this is breached.

Health and Wellbeing Board:	Dorset	
Completed by:	Sarah Sewell	
E-mail:	sarah.sewell@dorsetcouncil.gov.uk	
Contact number:	1305221256	
Has this report been signed off by (or on behalf of) the HWB Chair at the time of submission?	No	
If no, please indicate when the report is expected to be signed off:	Wed 19/11/2025	<< Please enter using the format, DD/MM/YYYY

Checklist

Complete:
Yes
Yes
Yes
Yes
Yes
Yes

Better Care Fund 2025-26 Q2 Reporting Template

3. National Conditions

Selected Health and Wellbeing Board: Dorset

Confirmation of Nation Conditions			Checklist Complete:
National Condition	**Confirmation**	**If the answer is "No" please provide an explanation as to why the condition was not met in the quarter and mitigating actions underway to support compliance with the condition:**	
1) Plans to be jointly agreed	Yes		Yes
2) Implementing the objectives of the BCF	Yes		Yes
3) Complying with grant and funding conditions, including maintaining the NHS minimum contribution to adult social care (ASC) and Section 75 in place	Yes	We are complying with the grant and funding consitions, but we are delayed in updating our Section 75, we have live work in train to complete this.	Yes
4) Complying with oversight and support processes	Yes		Yes

Better Care Fund 2025-26 Q2 Reporting Template

4. Metrics for 2025-26

Selected Health and Wellbeing Board: Dorset

For metrics time series and more details: BCF dashboard link

For metrics handbook and reporting schedule: BCF 25/26 Metrics Handbook

4.1 Emergency admissions

Plan		Apr 25 Plan	May 25 Plan	Jun 25 Plan	Jul 25 Plan	Aug 25 Plan	Sep 25 Plan	Oct 25 Plan	Nov 25 Plan	Dec 25 Plan	Jan 26 Plan	Feb 26 Plan	Mar 26 Plan
Emergency admissions to hospital for people aged 65+ per 100,000 population	Rate	1,476.7	1,510.9	1,422.8	1,451.9	1,518.6	1,368.1	1,557.0	1,401.4	1,480.9	1,502.3	1,361.2	1,426.2
	Number of Admissions 65+	1,727	1,767	1,664	1,698	1,776	1,600	1,821	1,639	1,732	1,757	1,592	1,668
	Population of 65+	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0

Assessment of whether goal has been met in Q2:	On track to meet goal
If a goal has not been met please provide a short explanation, including noting any key mitigating actions.	Emergency Admissions Actuals: April: 1,587 May: 1,590 June: 1,603 July: 1,603 August: 1,515 Sept (estimated) 1,558
You can also use this box to provide a very brief explanation of overall progress if you wish.	The future care programme has a workstream focused on alternatives to admission. The key metrics are 1) the number of SDEC starts per week, Number of patients referred to community services from ED front door and the number of H@H admissions per week. To achieve this the A2A is: 1) Improving the number of patients pulled from ED front door into SDEC's 2) Improving the flow from SDECs and ED to H@H 3) Established a front door to community MDT with community services to review and refer patients from ED to community services.

Did you use local data to assess against this headline metric?	Yes

If yes, which local data sources are being used?	DiiS System visability dashboard.

4.2 Discharge Delays

Original Plan	Apr 25 Plan	May 25 Plan	Jun 25 Plan	Jul 25 Plan	Aug 25 Plan	Sep 25 Plan	Oct 25 Plan	Nov 25 Plan	Dec 25 Plan	Jan 26 Plan	Feb 26 Plan	Mar 26 Plan
Average length of discharge delay for all acute adult patients (this calculates the % of patients discharged after their DRD, multiplied by the average number of days)	0.90	1.31	1.40	1.22	1.09	1.08	0.80	0.61	0.84	1.04	0.85	0.83
Proportion of adult patients discharged from acute hospitals on their discharge ready date	87.1%	85.5%	82.5%	86.4%	87.9%	88.0%	90.0%	91.3%	89.5%	88.5%	89.4%	89.6%
For those adult patients not discharged on DRD, average number of days from DRD to discharge	7.00	9.00	8.00	9.00	9.00	9.00	8.00	7.00	8.00	9.00	8.00	8.00

Assessment of whether goal has been met in Q2:	Not on track to meet goal
If a goal has not been met please provide a short explanation, including noting any key mitigating actions.	Discharge Delays Actuals: April: 86.8% May: 87.6% June: 87.9% July: 88.0% August: 86.4% Sept (estimated): 87.4%
You can also use this box to provide a very brief explanation of overall progress if you wish.	The future care programme has a workstream focused on Transfer of Care (TOC). The TOC workstream has 2 key metrics: Reducing LOS for those with no criteria to reside and increasing the number of people returning home. To achieve this TOC has 3 key area of focus: 1) Improving early discharge planning. 2) Bringing decision making into one place where multi agency teams work together to increase efficiency around discharge planning. 3) Improving how we record and track what is happening for people requiring care and support to leave hospital so we have greater clarity on next actions for people.

Did you use local data to assess against this headline metric?	Yes

If yes, which local data sources are being used?	DiiS System Vsability Dashboard

4.3 Residential Admissions

Actuals + Original Plan		2023-24 Full Year Actual	2024-25 Full Year CLD Actual	2025-26 Plan Q1 (April 25-June 25)	2025-26 Plan Q2 (July 25-Sept 25)	2025-26 Plan Q3 (Oct 25-Dec 25)	2025-26 Plan Q4 (Jan 26-Mar 26)
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Rate	493.4	411.3	114.6	113.7	110.3	89.8
	Number of admissions	577.0	481.0	134.0	133.0	129.0	105.0
	Population of 65+*	116952.0	116952.0	116952.0	116952.0	116952.0	116952.0

Assessment of whether goal has been met in Q2:	On track to meet goal
If a goal has not been met please provide a short explanation, including noting any key mitigating actions.	
You can also use this box to provide a very brief explanation of overall progress if you wish.	We are continuing to monitor this metric as Q2 performance, like Q1, it remains ahead of target. Now that ONS mid year estimates have been released for 2024, we will review inline with other data sets to review our target.

Did you use local data to assess against this headline metric?	Yes

If yes, which local data sources are being used?	Statutory and internal data sets

Better Care Fund 2025-26 Q2 Reporting Template

5. Income & Expenditure

Selected Health and Wellbeing Board: Dorset

Source of Funding	2025-26 Planned Income	Updated Total Plan Income for 25-26	DFG Q2 Year-to-Date Actual Expenditure
DFG	£5,152,517	£5,152,517	£2,729,218
Minimum NHS Contribution	£39,145,707	£39,145,707	
Local Authority Better Care Grant	£15,359,816	£15,359,816	
Additional LA Contribution	£59,440,839	£59,440,839	
Additional NHS Contribution	£36,997,733	£36,997,733	
Total	**£156,096,612**	**£156,096,612**	

	Original	Updated	% variance
Planned Expenditure	**£156,096,612**	£156,096,612	**0%**

		% of Planned Income
Q2 Year-to-Date Actual Expenditure	£72,413,187	**46%**

If Q2 year to date actual expenditure is exactly 50% of planned expenditure, please confirm this is accurate or if there are limitations with tracking expenditure.	

If planned expenditure by activity has changed since the original plan, please confirm that this has been agreed by local partners. If that change in activity expenditure is greater than 5% of total BCF expenditure, please use this box to provide a brief summary of the change.	N/A

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Health & Wellbeing Board

19 November 2025

Dorset Safeguarding Adults Board Annual Report 2024-2025

For Review and Consultation

Cabinet Member:
Cllr S Robinson, Adult Social Care

Local Councillor(s):
N/A

Senior Leadership Team:
J Price, Executive Director of People - Adults

Report author and job title: Siân Walker-McAllister, Dorset Safeguarding Adults Board (DSAB) Independent Chair
Email: contact Fran Needham, Business Manager
Francesca.needham@bcpcouncil.gov.uk

Statutory Authority: Dorset Safeguarding Adults Board

Report status: Public Choose an item.

Executive summary (maximum of 500 words)

The Dorset Safeguarding Adults Board (SAB) publishes an Annual Report each year and is required, as set out in the Care Act 2014, to present this to the Council's Health & Wellbeing Board.

Many Councils also request that the report is presented to Scrutiny as the report enables a discussion on the work of the Safeguarding Adults Board. The attached report is for the year April 2024 to March 2025.The report was agreed at the September meeting of the Dorset Safeguarding Adults Board (DSAB).

The Dorset SAB has successfully worked together with the BCP SAB with joint meetings over the year. We publish 2 separate Annual Reports, one for each of the Boards as they are separately constituted. Throughout 24-25, Dorset SAB has delivered against all priorities which are set out in the annual work plan; this Annual Report summarises what the Board has achieved.

Recommendation(s)

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.

Reason for the recommendation(s)

1. In setting out how the SAB has delivered against the strategic plan during the year, this Annual Report also acknowledges the contribution each of the board partners has made to implementing its strategy. The Strategic Plan for this current year is set out on Page 8.
2. The safeguarding data for Dorset is shown on Page 7 of the Annual Report.
3. It is a statutory requirement that the Annual Report provides a summary of any Safeguarding Adults Reviews (SARs) which were published within the year. These are statutory reviews commissioned by the Board, where someone with care and support needs has died or suffered significant harm and where agencies could have worked better together.

The report

Dorset Safeguarding Adults Board Annual Report 2024-2025.

Alternative options considered
N/A

Legal considerations
As set out in the Care Act 2014, it is a statutory requirement for the Safeguarding Adults Board to publish an Annual Report each year and to present that report to the Council's Health & Wellbeing Board. The Annual Report must also include details of any Safeguarding Adults Review (SAR) which has been commissioned by the Board.

Financial implications
The budget for the Board is shown on Page 6 of the Annual Report – it shows contributions made by each Council and the partners. For this financial year, the Board has worked as a single business unit.

Natural environment, climate & ecology implications
N/A

Well-being and health implications
The continual support and challenge role of DSAB with partner organisations and others will contribute positively to the health and wellbeing of local residents. The Annual Report is reviewed by Healthwatch prior to publication.

Other implications
N/A

Risk implications
N/A

Equalities
The SAB works with partner organisations to ensure that all residents have the same opportunity of receiving services in relation to safeguarding, without discrimination. The SAB Quality Assurance Subgroup works with data analysts from statutory partners to identify any potential statistical differences in respect of those accessing safeguarding services and any relevant demographic factors

Appendices

Appendix 1 – Dorset Safeguarding Adults Board Annual Report 2024-25

Background papers

N/A

Report sign-off

This report has been approved by the DBCPSAB Board at their meeting on 25 September 2025

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Dorset Safeguarding Adults Board

ANNUAL REPORT 2024-2025

Safeguarding is everybody's business

Contents

Foreword

I'm delighted to introduce the Dorset Safeguarding Adults Board (SAB) Annual Report 2024-2025. Over the last year, we have continued to strengthen our commitment to safeguard adults with care and support needs from abuse, harm and neglect in Dorset.

Our Board continues to meet jointly with the BCP Safeguarding Adults Board and shares all subgroups which enables us to work efficiently with our partners across the local authorities, NHS and the Police and with many other public, voluntary and community sector organisations. A separate annual report is published for BCP Safeguarding Adults Board as we have constitutionally retained separate Boards, enabling us to have place-based meetings where required.

It has been a busy and challenging year for many of our partners with increasing pressures across the system, though we have continued to work closely together to progress the priorities set out in our strategic plan to keep people safe. This has included:

- agreeing protocols for closer working with HM Coroner for Dorset
- strengthening our relationships and focus on safeguarding in Prisons and for those upon release from prison, through improved system engagement
- sharing best practice and embedding learning through our annual multi-agency SAR learning event.

In addition to assurance through Board meetings and subgroups, our partners completed an annual audit providing evidence to the Board that their safeguarding arrangements are effective and that learning from safeguarding reviews is being embedded in practice throughout their organisations.

In 2024-2025 BCP Safeguarding Adults Board published SAR Edward, which highlights key learning points around people who are cuckooed and how professionals use Multi-agency Risk Management processes to support and protect them. Although a BCP SAR, the learning has been shared with agencies across both BCP and Dorset.
I remain committed to ensuring that people's voices and their lived experience are reflected in our learning and approach to safeguarding with every Board meeting featuring a personal safeguarding story.

In 2025-2026, we will be refreshing our strategic plan as well as developing a new website to continue to promote safeguarding adult awareness and practice.
I would like to thank the continued commitment, leadership and hard work of all our partners and also of the Board support team.

Siân Walker McAllister
Independent Chair Dorset Safeguarding Adults Boards

The role of a Safeguarding Adults Board

A Safeguarding Adults Board (SAB) plays a crucial role in both prevention of and protecting adults with care and support needs who are at risk of abuse, harm and neglect by providing multi-agency strategic oversight of adult safeguarding.

A SAB oversees and seeks assurance on the effectiveness of the safeguarding work of its members and partner agencies which includes the Local Authority, NHS, Police, Probation services, Prisons, Fire service, community and voluntary organisations.

Its functions and responsibilities are outlined in the Care Act 2014. Dorset Safeguarding Adults Board has three core duties:

- Developing and publishing a **strategic plan** detailing how we will meet our objectives and how our partner agencies will contribute to delivering our strategic priorities
- Publishing an **annual report** to report on progress against our strategic priorities and how effective we have been
- Commissioning and publishing **Safeguarding Adult Reviews** (s.44 of the Care Act) when an adult in our area dies as a result of abuse, harm and neglect , whether it is known or suspected and there is a concern that partner agencies could have worked more effectively to protect the adult.

SABs must arrange a Safeguarding Adult Review if an adult in its area has not died but the SAB knows or suspects that the adult has suffered serious abuse or neglect and must ensure partners demonstrate how they work together so that lessons learned impact the future delivery of services to those with care and support needs.

The Dorset and BCP Safeguarding Adults Boards are made up of senior representatives from the following agencies:

Our Statutory Partners

BCP Council

Dorset Council

Dorset Police

NHS Dorset

Local Authority representatives from Dorset and BCP Councils include senior officers from Adult Social Care and Housing as well as Cabinet Members for Adult Social Care.

Our Board Member Organisations

NHS Dorset HealthCare University NHS Foundation Trust

NHS Dorset County Hospital NHS Foundation Trust

NHS University Hospitals Dorset NHS Foundation Trust

Volunteer Centre Dorset

NHS England

NHS South Western Ambulance Service NHS Foundation Trust

Dorset & Wiltshire Fire and Rescue

healthwatch Dorset

Department for Work & Pensions

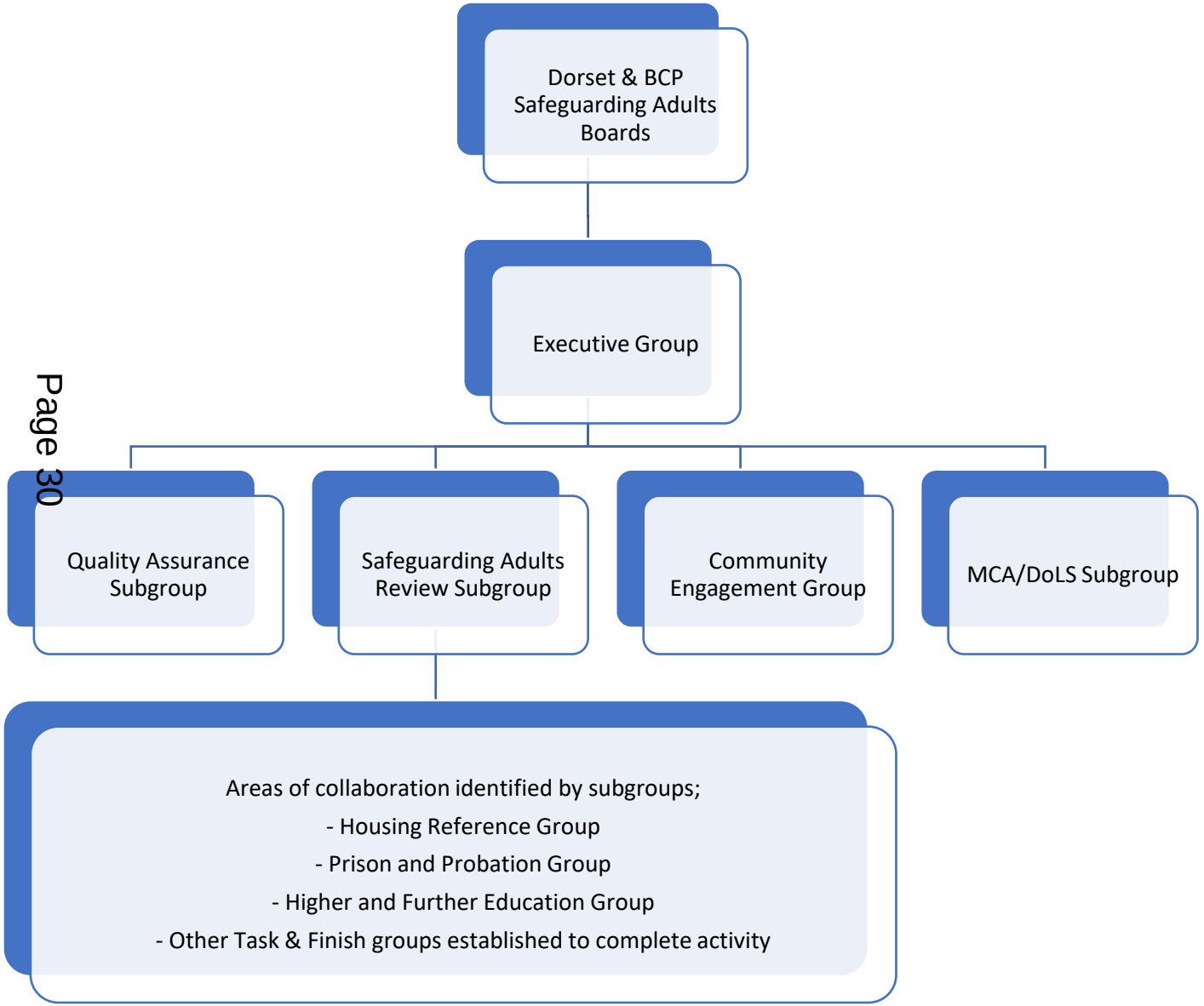
CAN Community Action Network

Probation Service

HM Prison Service – Public Sector Prisons

HMP Guys Marsh
HMP Portland
HMP The Verne

Structure of the Dorset & BCP Safeguarding Adults Boards



Budget 2024-2025

Dorset & BCP SABs maintain a working budget to enable them to undertake their work, and the priorities identified in the strategy and business plan. Each year, contributions are received from statutory partners to support this work. During 2022-2023 the two Boards merged the Business Units and subsequently the budgets.

The Dorset and BCP SABs are grateful for the financial support of partners which enables us to carry out our work.

BCP Council	£70,000
Dorset Council	£70,000
NHS Dorset	£38,745
Dorset Police	£19,404
Total	**£198,149**

Dorset Council Safeguarding activity in 2024-2025

Concerns received S42.1	
Numbers received	7,291

Progressed to a Sec 42.2 Enquiry	
Numbers received	729

Breakdown of CONCLUDED Sec 42.2 Enquiries

Service Provider (private sector)	37%
Relative/family carer	17%
Known individual but not related	9%
Other private sector	12%
Top 4 Types of Abuse	
Neglect & Acts of Omission	52%
Financial or Material	9%
Physical	8%
Psychological	8%
Top 4 Locations of Abuse	
Own home	48%
Care home (Residential)	26%
Care home (Nursing)	14%
In the Community	4%

Outcome of the Sec 42.2 Enquires (when risk identified)

Risk Removed	33%
Risk Reduced	59%
Risk Remains	8%

Gender & Age

Women (61%) are more likely to be the subject of a S42.2 Enquiry in Dorset than men (38%) over all age groups.
Numbers are higher for those aged 75+ with a notable increase for those aged 85+

Strategic Plan 2023-2026

The Dorset and BCP Safeguarding Adults Boards' strategic aim is to ensure adults are safeguarded by empowering and supporting them to make informed choices and decisions (Making Safeguarding Personal).

Preventative work in safeguarding	Seeking assurance on safeguarding practices	Assurance on delivery of 'Making Safeguarding Personal' (MSP).
Prevention Aim:	**Accountability Aim:**	**Partnership working Aim:**
Continued development with partners of preventative work in safeguarding.	Continuing to seek assurance on safeguarding practice across system partners.	Assurance on delivery of 'MSP' using a whole family approach.
We will: • Review learning from SARs from DBCPSAB & other Boards and revisit thematic learning from reviews to inform preventative work with adults with care and support needs. • Ensure we always take account of the experiences of people who use services or receive safeguarding interventions. • Seek assurance on an annual basis from partners that learning is embedded in the work of all frontline staff in all services in line with our Training & Development strategy. • Ensure that the Boards' subgroups are able to provide evidence of system learning and working to deliver preventative work. • Ensure there is good multi-agency working with a contextual safeguarding approach to preventative work with people who are homeless. • Improve use of data from all partners to enable us to identify trends which influence preventative work across all agencies	We will: • Continuously develop how we receive assurance as governance frameworks evolve across every statutory partner. • Ensure data is understood/ used to identify themes for every partner to progress in their safeguarding work; that information and learning is shared across the system. • Work in partnership across the safeguarding children and community safety partnerships to ensure that complexities of 'Transitional Safeguarding' are understood well. • Seek assurance on delivery of safe and person-centred practice in private mental health hospitals and for all placements of people outside our area. • Seek assurance that 'Think Family' practice across all agencies is embedded. • Continue to seek assurance on health & social care practice and provider care quality. • Seek assurance that the system is working to safeguard people via the new national policing initiative, 'Right Person, Right Care'	We will: • Seek assurance from all partners that Making Safeguarding Personal (MSP) is embedded throughout all agencies' safeguarding work. Seeking evidence that people have opportunity to express their outcomes at every stage in their safeguarding journey. • Involve people in the work we do – review how we communicate more widely with people and listen to and act upon the voices of those who have experienced safeguarding interventions. • Deliver our communication/ engagement strategy to the widest audience with the support of the voluntary and community sector through our Community Engagement Subgroup. • Ensure that the Quality Assurance subgroup continues to audit application of MSP and provides data which evidences that application of MSP is embedded.

Key achievements in 2024-2025

In our strategy we said...	This is what we achieved…….
Continued development with partners of preventative work in safeguarding	• Agreed protocols with the HM Coroner for Dorset, on working together in respect of SARs and Inquests • Worked with Public Health to develop a protocol to respond to suicide clusters and deliver SAB governance so there can be effective links with SARs • Continued with our programme of Prison Visits - in August 2024 visited HMP Guys Marsh to re-engage with developing safeguarding in prisons with particular focus on pre-release • A joint event was held in September 2024 with professionals from the criminal justice sector, with a focus on safeguarding within prison settings and preparation for and beyond release. Participants included 3 local prisons as well as HMP Eastwood Park (nearest Women's Prison in Gloucestershire), local Probation Service and LA safeguarding & housing teams along with NHS providers. • Attended and participated in the Dorset Council Safeguarding Adults Conference in November 2024.
Continuing to seek assurance on safeguarding practice across system partners	• Focused on policy/ governance development and review - Complaints Policy; SAR Policy; Subgroup Terms of Reference; SAB Constitution; Multi-Agency Safeguarding Procedures and shared with Partners. A SAR Subgroup Development Event was held in November 2024 to address working effectively and efficiently to the revised SAR Policy • A SAR Learning Event was held in June 2024 with over 300 colleagues from SAB partner organisations – the event featured the Boards' SARs 'Billy' and 'Simon'; and 2 SARs of national significance together with a presentation on the 2nd National SAR Analysis • Published '7-Minute' Learning Review on SAR 'Billy' and delivered confidential Learning Review on SAR 'Elizabeth'. 7 Minute Learning SAR Billy • Published a '7-Minute' Learning on Diagnostic Overshadowing 7 Minute Learning Diagnostic Overshadowing • Commenced production of our SAB Newsletter, sharing it widely and receiving positive feedback.
Assurance on delivery of ''Making Safeguarding Personal' (MSP) using a whole family approach	• Partners reflected on their MSP practice in our annual audit questionnaire. • Many different 'Personal Safeguarding Stories' presented by our Partners at Board Meetings • The Community Engagement Group (CEG) continues its work looking at preventative measures with the aim of supporting people across our communities. Dorset Police presented the Herbert Protocol and CEG heard from organisations focusing on Dementia care.

Subgroup Chairs reports 2024-2025

Community Engagement Group (CEG) Subgroup	Membership continues to be a focus; to increase membership giving a broader representation of VCSE (Voluntary, Social & Community Enterprise) sector across Dorset & BCP areas. Chaired by Voluntary & Community Sector (VCS) representatives from Council areas, bringing together a wide range of skills and knowledge of the wider sector. The group met 3 times in 2024-2025 and members discussed what is important to them, in respect of safeguarding, leading to a focus on Self Neglect, Hoarding and local authority safeguarding referral processes. The CEG received presentations from Dorset & Wiltshire Fire and 'Prama Life' on the work they do to support people who hoard, which helps minimise risk. Both Dorset and BCP Councils Adult Social Care partners presented on their safeguarding referral process, giving organisations and volunteers clarity and increased knowledge about reporting safeguarding concerns. The CEG works to refresh and review good safeguarding practices within the VCSE and share these findings and learning across the sector and has worked with the Boards' subgroups to ensure that the VCSE is recognised as often being the first point of contact for Dorset & BCP residents and that the sector often initiates reporting a concern when supporting adults in the community.
Safeguarding Adult Review (SAR) Subgroup	The Safeguarding Adult Review (SAR) subgroup met on 6 occasions throughout 2024-2025. The Subgroup held a Development Event in November 2024 to highlight the revised SAR Policy and the SAR referral process. During 2024-2025 the SAR subgroup facilitated the publication of one safeguarding adult review - SAR Edward. The subgroup has considered 8 referrals over the last year and 2 of these met the criteria for commissioning a SAR. These 2 individuals both experienced self neglect, one SAR will focus on system learning and the other will use a learning event methodology.
Mental Capacity Act/ Deprivation of Liberty Safeguards (MCA/DoLS) Subgroup	During this year the Mental Capacity Act & Deprivation of Liberty Safeguards (MCA & DoLS) Subgroup was established and met 3 times, Key areas of focus for the group included fluctuating capacity & executive function, community DoLS and data benchmarking. The group is gaining momentum and working well to address key issues. The subgroup's links to other groups are already proving valuable. Discussions and information sharing will lead to better practice and practitioners feeling more supported. Regularly discussing SARs will enable the subgroup to address specific issues and ensure that actions and learning points are effectively tracked and implemented.

Subgroup Chairs reports 2024-2025

Quality Assurance (QA) Subgroup	In 2024-2025, the QA Subgroup focused on ensuring that it can measure that learning and insights are embedded across partner agencies. Building on an audit by partners into self-neglect in 2023-2024, the QA subgroup agreed 5 key assurance indicators in 2024-2025 which will form part of future assurance. The group has reviewed • the Drug Harm Strategy • and given further consideration to the impact on safeguarding on the cost-of-living crisis and agreed a focussed examination of whether there is any evidence that the cost-of living crisis is impacting the volume and complexity of safeguarding risk for adults with care and support needs in BCP and Dorset. Future areas of focus include embedding 'Think Family' and developing a closer working relationship with other Board subgroups - in particular the SAR subgroup, to track and provide assurance on the delivery of learning and improvements in practice following publication of SARs.

Safeguarding Adult Reviews (SARs)

The Safeguarding Adults Board is currently working on a number of SAR referrals which will likely be published in this current year.

All previous published SARs can be found on our Dorset web page Dorset SAB published SARs

Partner assurance

This section includes a short report from each of our partners which highlights their achievements in 2024-2025 and the work they have done to embed learning from Safeguarding Adults Reviews, strengthen safeguarding practice and ‘Make Safeguarding Personal’.

Dorset Council Adult Social Care, Commissioning & Operational Services

Achievements during 2024-2025

Adult Social Care

- The Transitional Safeguarding Pathway was agreed and launched and 'High-Risk Transitional Safeguarding Meetings' developed to discuss/share emerging concerns/ themes about young people as they step into adulthood
- Improved alignment and connectivity between Adults and Children's Services through the 'Birth to Settled Adulthood' Team and attendance at 'Extra Familial Harm' meetings and Multi Agency Child Protection Board meetings. This continues to promote a whole family approach to practice
- Joint commissioning by Adult & Housing and Children's services of focused learning review to support development of the approach to supporting young adults who have experienced trauma and exploitation; to ensure the right support is in place and to enhance understanding barriers in accessing support
- Delivery of Adult Safeguarding & Migration & Asylum-Seeking lectures at Bournemouth University Social Work programmes
- Specialist Safeguarding service redesign underway, with specialist practitioner roles developed with a focus on self-neglect, drug & alcohol and transitional safeguarding
- Continued engagement with prisons to ensure prisoners' rights are upheld and transition from prison into the community can be improved.
- Improving attendance, knowledge and understanding of Multi Agency Public Protection Arrangements (MAPPA) - training delivered and staff guidance developed with support of MAPPA Chair
- Quarterly Safeguarding webinars continue, with recent themes including the 'Herbert Protocol', MAPPA, and Modern Slavery
- Introduced new provider safeguarding webinars to support continued learning and improve practice
- Delivered a multi-agency Safeguarding Conference, with sessions reflecting 'partnership working' theme of National Safeguarding Adults Week
- Bespoke delivery of adult safeguarding support for 'Bibby Stockholm' residents and positive engagement with the Home Office.
- SAB Quality Assurance Governance work linked to the Dorset Council quarterly Board meeting. Adult Social Care operational assurance is provided through monthly and specialist thematic auditing.

Dorset Council Adult Social Care, Commissioning and Operational Services

Achievements during 2024-2025

Housing

- Dorset Council has developed a Single Complex Women's Project with 6 flats for women who are at risk of rough sleeping and/or sexual exploitation, The property provides 24-hour security and support
- New role developed to link housing and adult social care more actively supporting holistic decision making/ planning, early discharges, and better outcomes
- Key role in Multi Agency Forum with the Home Office in respect of the former Bibby Stockholm Barge
- Worked alongside the Office of Police & Crime Commissioner (OPCC), to commission 'Safe Lives', delivering a Public Health approach to review the Pan-Dorset response to domestic abuse. This included consultation with Adult Safeguarding
- Successfully recommissioned its Integrated Domestic Abuse Service service
- Community Safety Team funded 2 specialist Domestic Abuse Housing Caseworkers to provide a more holistic and person-centred service
- NHS and Housing fund a Mental Health Caseworker, working alongside the discharge teams in Forston Clinic and St Annes Hospital to improve outcomes for those leaving psychiatric hospitals.

Commissioning

- Consistent engagement between adult safeguarding and quality assurance and monitoring teams
- Continued communication and engagement with the Care Quality Commission
- Supporting multi-agency responses and engagement for provider failures and critical incidents
- Monitoring social care providers' compliance with Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS)
- Support to deliver provider events and cascade information and updates consistently e.g. contracture awareness
- Positive interface with MCA/ DoLS service; sharing intelligence and observations noted during provider visits to enable timely follow up action
- Redesign of the Council's approach to Contract Management
- Development of an Out of County Quality Assurance and Contract management protocol
- Development of a new commissioned social care provider 'Risk Profiling tool' that captures data in respect of safeguarding concerns linked to providers, and their CQC ratings following inspection audits and intelligence from QA audits.

Dorset Council Adult Social Care, Commissioning and Operational Services

Challenges to effective safeguarding adults

- The volume of concerns received which do not meet the statutory safeguarding criteria but impact on the ability to process and respond to those that do. There is a need for social care providers to develop their understanding in respect of what is required to be reported as safeguarding, general quality feedback, and the expectations of CQC
- Provision of assurance in respect of overseas recruitment/ sponsorship arrangements (which are set nationally), ensuring that quality of care and risk management is understood and managed effectively, particularly where safeguarding concerns are raised and when someone has been dismissed or has resigned. Assurance needs to be given about monitoring and follow up by social care providers and the Home Office
- Increasing incidents/ concerns about modern slavery in the care sector. Dorset Council is contributing to national ADASS discussions about this
- Ensuring cumulative nature of concerns in respect of social care providers are effectively captured and understood and can inform systemic and timely responses for escalation into safeguarding concerns or whole service enquiries.
- Information sharing – access to and use of information across organisations to enable improved partnership working and response to risk.

Dorset Council Adult Social Care, Commissioning and Operational Services

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

- Dorset Council actively engages in all learning from SARs locally. A particular focus, this year, has been given to Transitional Safeguarding and Self Neglect. Changes already made include the launch of a joint Transitional Safeguarding pathway across Adults & Housing and Children's Directorates to improve the experiences of and services for young people where significant risk of harm is identified but the young person who may not already be known The SAR National Analysis highlighted 'Transitional Safeguarding' as a particular area for focus and development which has informed our work in this area alongside learning from SAR Hermione - Devon Safeguarding Adults Partnership and an internal single agency review commissioned by Dorset Council. The learning obtained from these reviews has provided a positive platform for adults, housing, and commissioners to further build on practice being developed locally
- Dorset Community Safety Partnership has been actively engaged with learning from SAR Katherine by commissioning an audit of High-Risk Domestic Abuse (HRDA) meetings to ensure older people experiencing domestic abuse receive support which meets their individual needs. The recent re-commissioning of Domestic Abuse support services in Dorset included representation from Adult Safeguarding to ensure those individuals with care and support needs were understood, incorporated and the service is accessible. The adult safeguarding lead was also interviewed as part of the 'Safe Lives' research commissioned by the Police & Crime Commissioner. This enabled a specific highlight to ensuring individuals with care and support needs are supported equitably and services can respond to any specific needs the person may have
- Following publication of SAR Billy which highlighted learning about working with individuals who have complex needs including physical disabilities, co-morbidity health conditions and substance misuse, Dorset Council has been working more closely with Public Health colleagues and Housing to develop an enhanced understanding of barriers faced and options available. A new Adult Social Care & Housing post has been developed to bridge this gap - providing a holistic focus to presenting needs, understanding opportunities for creative commissioning options is key to this new role and learning
- Two new specialist practitioner roles created within adult safeguarding service to provide support and guidance to individuals who are self-neglecting and/ or have drug/ alcohol dependencies.
- Actively working on SAR Simon action plan to consider how Simon could have been better supported upon his move to Dorset from Scotland. Ensuring good cross border placements/ transfer of care are a key focus for Dorset Council and the ADASS guidance is utilised to ensure expectations.
- Dorset Council has joined a south-west 'Task & Finish' Group to implement a tool which supports quality assurance for Councils when people have been placed out of county.

Dorset Police

Achievements during 2024-2025

- Established Safeguarding Hubs around two years ago. Over the past year the benefits of these have been realised through the closer links with the Local Authorities and greater focus on investigations involving offences against vulnerable adults
- Established a 'Vulnerability' Board chaired by an Assistant Chief Constable to provide a more strategic forum for issues to be raised.

Challenges to effective safeguarding adults

The challenge internally remains ensuring that the Adult Safeguarding agenda receives the same level of attention as other areas of policing.

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

The recommendations from all SARs are managed through our Force Operational Learning Board which is chaired by an ACC. This provides an audit around the implementation of the findings.

NHS Dorset

Achievements during 2024-2025

In 2024–2025, NHS Dorset significantly enhanced their Multi-Agency Risk Management (MARM) capabilities. By expanding resources and further embedding the MARM process more deeply into everyday practice, they've enabled a more coordinated, proactive, and person-centred response to complex risk scenarios. This work reinforces their commitment to safeguarding through integrated, collaborative care.

Recognising the critical link between data protection and safeguarding, the NHS Dorset safeguarding team worked closely with the NHS Dorset Data Protection Team to explore how these domains intersect. This joint initiative has improved mutual understanding and fostered stronger collaboration, ensuring that patient data is safeguarded while our statutory responsibilities are fulfilled with greater confidence and cohesion.

Understanding the complexities of applying the Mental Capacity Act (MCA) within their local NHS system is an essential part of NHS Dorset's role. To support this, The Designated professional for Adult Safeguarding led a comprehensive stakeholder engagement study. This work brought together expert voices within the local NHS system to identify key challenges and co-develop practical solutions. The insights gained will directly inform strategic planning, enhance frontline practice, and guide meaningful improvements in how the MCA is implemented across services.

Supporting 'Named Professionals' is a core part of the Designated Professional role. In line with this, the Designated professionals for Children and Adult Safeguarding collaborated with colleagues at South Western Ambulance Service to deliver tailored training on writing high-quality Statutory Reviews. This initiative has strengthened skills, boosted confidence, and ensured that learning from safeguarding cases is captured clearly and consistently, ultimately contributing to better outcomes for the people we serve.

NHS Dorset

System Level achievements

In 2024-2025, the Designated Professional for Adult Safeguarding dedicated time to visiting a wide range of frontline services, including Dorset Volunteer Centre, food bank, acute NHS trusts, and commissioned NHS services. These visits provided invaluable, ground-level insight into the services being delivered and the safeguarding challenges faced by staff and volunteers alike. The rich understanding gained from these engagements has directly informed strategic discussions and played a key role in shaping NHS Dorset's new commissioning strategy, ensuring it is responsive, inclusive, and grounded in the realities of those working closest to the community.

During Safeguarding Adults Week 2024, NHS partners across Dorset launched a new resource designed to promote and support professional curiosity. This collaborative tool empowers practitioners to ask the right questions, challenge assumptions, and explore concerns more confidently, strengthening safeguarding practice and helping to ensure that adults at risk receive the support and protection they need.

The 'Named' GPs for Safeguarding led the completion of a workstream focused on raising awareness across acute and community trusts about the risks associated with prospective access to GP records, particularly the potential for coercive access in cases of domestic abuse. Through targeted engagement, it was ensured that trusts and GP surgeries were informed of the safeguarding implications, prompting the implementation of training and system safeguards. These measures now help prevent sensitive information, such as letters or consultation notes. This work has been especially vital in protecting victims of domestic violence, where risk of a perpetrator accessing records through coercion could significantly increase harm. The initiative has strengthened data protection practice and embedded a safeguarding lens into digital access protocols across Dorset.

Challenges to effective safeguarding adults

NHS Dorset is actively working to build a more comprehensive understanding of safeguarding activity across the entire health sector, including areas beyond our major NHS providers. While current insights are strongest within acute and community services, we recognise the opportunity to strengthen our visibility in sectors such as dental and independent healthcare. By enhancing data-sharing partnerships and broadening our engagement, we aim to provide the Board with richer, more informed advice to support the development of effective, system-wide safeguarding strategies. Our ongoing collaboration with local authorities remains a valuable foundation for this work, and we are committed to expanding and refining our approach.

NHS Dorset

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

In 2024-2025, NHS Dorset has taken significant steps in strengthening its safeguarding system, driven by powerful learning from a series of Safeguarding Adults Reviews (SARs), including SARs "Billy," "Simon," "Aziza," and "Edward." Each review offered critical insights into areas such as multi-agency communication, risk escalation, and early intervention, highlighting opportunities to improve how services respond to adults at risk.

In response, NHS Dorset has implemented a comprehensive programme of improvements across the organisation. This includes:

- **Enhanced training** to help staff build on their current competencies to further recognise and respond to cumulative risk factors, ensuring earlier and more effective intervention.
- **Refined information-sharing protocols** that support timely, coordinated action between NHS services and partner agencies.
- **Updated frontline guidance and tools** to promote professional curiosity and empower staff to make more confident, defensible safeguarding decisions.
- **Clearer escalation pathways** to ensure that concerns are addressed swiftly and appropriately.
- **Stronger collaboration with voluntary and community sector partners**, recognising their vital role in safeguarding and early support.
- **Strategic integration of SAR learning into commissioning processes** via the gateway review mechanism, embedding safeguarding as a core design principle in all services.

These actions reflect NHS Dorset's commitment to continuous learning, system-wide collaboration, and delivering person-centred, inclusive safeguarding. By turning the learning from SARs into tangible improvements, NHS Dorset is not only addressing past challenges but also building a more resilient, responsive, and compassionate safeguarding system for the future.

Dorset & Wiltshire Fire and Rescue Service

Achievements during 2024-2025

- Increased to 3 safeguarding team members, allowing more time for safeguarding responsibilities, created a 'Safeguarding Dashboard', developed bespoke training and resources (using QR codes, MSP posters and Z cards, family tree posters, Fatal Fire guidance document) and guidance.
- Enhanced our referral form to be more intuitive and have a specific drop down for circumstances of self-neglect.
- Launched 'FRS Speak Up', completed train the trainer National Fire Chiefs' Council (NFCC) 'Safer Recruitment' Training
- Programmed drop-in safeguarding awareness sessions at Stations ('brew with the crew').
- All 'Safe & Well' Advisors are now trained in 'mental health first aid'.
- The safeguarding team won a DWFRS award for 'Making a Difference' for their Violence against Women & Girls (VAWG) related work.

Challenges to effective safeguarding adults

FRS are attending more incidents for people in crisis, this can be problematic if we are the only emergency service at the incident and there is no access to a mental health professional, the knock on being delayed at incidents where we are not the right persons to support. We are experiencing resistance from some agencies to share information; we are working on resolving this.

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

When fire-related lessons are identified from SARs, we share them appropriately and make corresponding updates to procedures. We routinely monitor the National SAR Library on the National AB Chairs' Network website and discuss relevant fire-related cases during regional FRS safeguarding meetings. In addition, we review Regulation 28 reports and implement changes or updates as necessary.

South Western Ambulance Service Trust (SWAST)

Achievements during 2024-2025

- SWAST has progressed its safeguarding improvement plan. We have strengthened our governance arrangements, increased our team capacity and are delivering much improved safeguarding training for our staff, which is aligned to the intercollegiate documents.
- We have been able to fully review our Managing Professional Safeguarding Allegations policy and develop a Safeguarding Supervision policy.
- We have launched our telephone support line for frontline staff, this enables them to contact safeguarding specialists or, out of hours, advanced clinicians for safeguarding advice on scene.

Challenges to effective safeguarding adults

- Lack of capacity within the SWAST Safeguarding Services.
- Processes which were predominantly custom and practice rather than defined processes.
- A manual referral management process which can result in delays in sharing information and has been increasingly difficult to manage as we have seen a continual increase in safeguarding referrals.

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

- Within SWAST we have undertaken a significant programme of change within Safeguarding as a result of an independent review of many of the aspects covered within the project such as training, effective referrals processes, information sharing reflect the themes of SARS.
- On receiving recommendations from SARs, we have cross-referenced to ensure the learning/ recommendations are actioned. Where they are not, separate action is taken, e.g., adding application of professional curiosity within our safeguarding mandated training.
- SWAST recognise the themes of SAR recommendations appear to be; Training, application of Professional Curiosity and Mental Capacity Act.

Dorset HealthCare

NHS
Dorset HealthCare University
NHS Foundation Trust

Achievements during 2024-2025

- Full participation and sharing learning from Safeguarding Adult Reviews, Domestic Homicide Reviews, Child Safeguarding Practice Reviews (Thinking Family) and Multi Agency Public Protection (MAPP) reviews
- Continued improved training and support on domestic abuse and sexual violence (use of Domestic Abuse, Stalking and Harassment (DASH) Tool) and controlling and coercive behaviours
- Closer links with all inpatient wards to improve evidencing 'Making Safeguarding Personal' (MSP) and improving confidence and competence to undertake mental capacity assessments
- Implementing sexual safety standards on all mental health wards, including development of Sexual safety policy for all patients.
- Closer links with the Homeless health care team to support safeguarding practice.

Challenges to effective safeguarding adults

- Staff understanding of undertaking and recording mental capacity assessments,
- Staff understanding that safeguarding is everyone's business and a key component to all intervention (making safeguarding personal)
- Developing a joint understanding with partner agencies for committed attendance at Multi Agency Risk Management (MARM) meetings under the SAB guidance for good practice
- Ensuring patients admitted to community hospitals (physical health) have a legal framework in place and their human rights protected when lacking the mental capacity to consent to care and treatment within that hospital setting (interface between the Mental Capacity Act 2005 and the Mental Health Act 1983, amended 2007 with the introduction of Deprivation of Liberty Safeguards (DoLS).

Dorset HealthCare

Dorset HealthCare University
NHS Foundation Trust

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

The learning is shared via the Trust's bi-monthly Safeguarding Group, updated policy, training and guidance and discussed during calls to the safeguarding advice line.
Main areas of focus within 2024-2025 have been:

- Development of self-neglect training and links with the local authorities' self-neglect and hoarding panels.
- Updated the DHC MARM guidance developed from the SAB, including how to escalate concerns to partner agencies.
- The development and sharing of guidance on Diagnostic overshadowing.
- The continuation of an MCA improvement plan across the Trust.
- Closer links with inpatient wards to support 'Making Safeguarding Personal (MSP)
- Sharing information developed by the DBCP SAB to improve recognition and practice relating to 'Cuckooing'.

Dorset County Hospital

NHS Dorset County Hospital NHS Foundation Trust

Achievements during 2024-2025

- Development of Dorset County Hospital (DCH) Safeguarding team through positive recruitment
- Improved relationships and working practices with local partner agencies, allowing for more creative and co-ordinated approaches to statutory safeguarding (s42 Care Act) processes and discharge challenges related to safeguarding, resulting in some reduction of delayed transfers of care and a clearer understanding of each other's roles and limitations
- Coaching and supervision offer increased due to increase of resource within the team
- Strong 'think family' ethos demonstrated through quarterly data collection
- Improvements through weekly discussions and collaboration work with the discharge teams to consider 'making safeguarding personal' and reduce paternalistic views by ward teams
- Increased recognition by DCH staff of potential transferability of risk that require consideration under People in Positions of Trust (PiPoT) / Local Authority Designated Officer (LADO) process.

Challenges to effective safeguarding adults

- Increased activity throughout 2024
- Inability to release staff for additional training / learning due to high levels of activity and acuity.
- Insufficient reporting systems that will meet the new challenges of complex safeguarding
- Improvements to digital systems recognition: DCH staff need to consider greater utilisation of held information to inform decision making / multi agency planning
- Increasing demands on partner agencies, impacting on people remaining within an acute hospital for protracted length of time with no acute clinical requirements
- Limited support in respect of domestic violence due to commissioned service unable to backfill long term absence.

Dorset County Hospital

Dorset County Hospital
NHS Foundation Trust

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

- Mental Capacity Assessment/Mental Health Executive Function - Advice sought relating to a person who presented with an addiction to illicit substance/alcohol and appeared to lack capacity to make decisions about their care & treatment. Advice was that the Trust needed to assess capacity to consent to immediate care and treatment; that if the person had capacity, then the Trust would be unable to use apply the principles of the Mental Capacity Act in making decisions or apply for authorisation under the Deprivation of Liberty Safeguards (DoLS).
- Clarified that in terms of ongoing care and risks around discharge/placement/rehabilitation, the LA would be responsible for undertaking the assessment of capacity.
- Learning across all partners as a result. Prompt Multi-Agency Risk Management meeting (MARM) to discuss risks and how best managed within appropriate legal frameworks and resources/options available. Highlighted need to consider appropriate and lawful use of legislation and how these impacts upon the person, other patients on ward can, i.e. how imposing restrictions can increase challenging behaviour towards others in acute hospital setting and need to consider how these risks can be mitigated.

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University Hospitals Dorset (UHD)

University Hospitals Dorset NHS Foundation Trust

Achievements during 2024-2025

- Audited Safeguarding Referrals following internal observations and partner feedback about quality. The outcomes led to a revised Safeguarding Adult Referral which includes more in-depth information, captures the person's wishes, directs staff to other pathways where safeguarding criteria is not met, and shares information to more partners – including GPs. All safeguarding concerns identified on admission to UHD now also form part of the electronic record for all staff to see if they are providing care for that person
- Improved use of body maps and progress being made towards imaging of wounds/skin damage to improve documentation – Safeguarding is now embedded within clinical workstreams for 'Fundamentals of Care' including Tissue Viability and Record Keeping. We intend to join workstreams in the next year to ensure safeguarding is on all agendas
- Launch of L3 Safeguarding Adults training using the NHSE National E-Learning Hub modules and blended face to face elements to capture Trust and SAB learning from local cases and SARs. Significant improvement in Oliver McGowan e-learning training
- Active partners in SAB meetings/ sub-groups. We enjoy being partners with the teams, working closely with our internal discharge team and external partners including with the FRS 'Safe and Well' team which has improved signposting/ referral pathways for safe hospital discharges.

Challenges to effective safeguarding adults

A significant challenge has been protecting people's right to freedom, when a person does not have capacity to make a specific decision and does need to remain in hospital for their own safety. There have been challenges regarding lawful frameworks and how to facilitate multidisciplinary meetings to protect people's safety. Working within DBCP SAB MCA/ DoLS subgroup has meant an outcome of proactive discussion and strong working relations within our MCA teams and development of a system agreed Memorandum of Understanding (MOU) to escalate and resolve such cases. The MOU is in its final stages of ratification.

Within UHD we have experienced an increase of violence and aggression towards health staff, whilst we recognise that the health needs for some people are extremely complex, being abused is demoralising for our staff. UHD has a strong focus on staff wellbeing. We are working with partners to improve staff safety through de-escalation behaviours and trauma awareness and improved MAPPA information sharing.

University Hospitals Dorset

University Hospitals Dorset
NHS Foundation Trust

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

It is extremely positive that UHD is more actively involved as partners in SARs and DHRs. Learning from these statutory reviews is embedded within the organisation in a variety of ways:

- Shared via our global comms systems
- Reported and shared via our quarterly safeguarding steering groups, safeguarding groups, clinical governance groups and Quality Committee
- Added to our staff intranet pages
- Discussed and shared via our face-to-face blended training sessions
- Individual and team feedback, as appropriate via a reflective supervision session.

Department for Work and Pensions

Department for Work & Pensions

Achievements during 2024-2025

DWP continues to build capability around signposting to professionals/organisations to support our most vulnerable customers. We continue to share and use free training sought and shared through partner organisations to further build knowledge, confidence and understanding of subject areas falling under the safeguarding umbrella. We pride ourselves on our joined-up partnership/multi-agency approach to supporting our most vulnerable customers. We have 38 Advanced Customer Support Senior Leaders (ACSSL) across the country who support all benefit lines (Universal Credit, Employment Support Allowance, State Pension, Carers allowance) looking at improvements, lessons learnt, prevention and capability building.

Challenges to effective safeguarding adults

- GDPR – This can sometimes be a barrier when we are trying to gather information to support in safeguarding cases
- Lack of contact details/ trying to find the right person who can support with progressing a case.

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

- Many processes have been improved.
- Policy changes have taken place.
- Additional training delivered and refresh events.
- Increased resources to support activity within Advanced Customer Support.

Probation Services

HM Prison & Probation Service

Achievements during 2024-2025

During 2024–2025, Dorset Probation Service collaborated with local Adult Safeguarding Boards and Her Majesty's Prison & Probation Service (HMPPS) to deliver a joint event focused on strengthening partnerships between probation and prison services. This initiative aimed to improve mutual understanding of safeguarding challenges and foster more effective multi-agency working across the criminal justice system.

Challenges to effective safeguarding adults

Dorset Probation has encountered several challenges in delivering effective adult safeguarding, particularly in cases involving individuals held in custody outside the local area. These situations often require coordination across multiple safeguarding teams, which can lead to ambiguity around roles and responsibilities. In at least one instance, escalation to Multi-Agency Public Protection Arrangements (MAPPA) Level 3 was necessary to clarify agency responsibilities and ensure appropriate safeguarding oversight.

A further challenge has been the limited availability of suitable housing for individuals within the criminal justice system who have identified safeguarding needs. This issue is compounded when individuals are relocated across geographical boundaries, making continuity of care and safeguarding planning more complex.

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

In response to learning from both local and national SARs, Dorset Probation has taken several steps to strengthen safeguarding practice:

- All probation staff are now required to complete mandatory adult safeguarding training. This supports a more holistic approach to assessing and identifying the needs of individuals under supervision
- Efforts are underway to strengthen the strategic alignment between MAPPA Strategic Management Boards (SMBs) and local safeguarding boards, ensuring that safeguarding and risk management plans are better integrated.
- There is growing confidence among Dorset's middle management team in understanding the SAR process and making appropriate referrals, reflecting a positive shift in organisational learning and safeguarding culture.

HMP Guys Marsh

HM Prison & Probation Service

Achievements during 2024-2025

We have had some successes including achieving the achievement of positive outcomes for one prisoner who had been in custody since the 1960s where we were able to successfully reintegrate him into the Dorset community.

Challenges to effective safeguarding adults

There continues to be barriers in terms of social care assessments. However, due to the nature of our prison population this does not happen too often, but we do find when we do complete referrals there can be delays in us receiving support.

Learning from SARs – changes which have taken place within the past year in response to learning from local or national SARs?

Professional and multi-disciplinary team meetings are held with all required stakeholders present to ensure effective and timely sharing of information. We share risk related information both internally and externally as appropriate this includes with probation colleagues who will be supporting the prisoner on release.

HMP The Verne

HM Prison & Probation Service

Achievements during 2024-2025

- More joined up working with the local community in terms of safeguarding. This led to a bespoke Prisons meeting, organised by the Dorset & BCP SABs in September 2024 that dealt more specifically with the issues faced by prisons and risks associated with prison release.
- Neurodiversity Support Manager has liaised with Dorset Domestic Abuse Forum to spotlight challenges around neurodiversity in the perpetrator population and how the same neurodiverse issues in victims increase risk of harm and vulnerability.
- Prisons have their own policies around managing safeguarding in prison especially around risks of self-harm and suicide.
- There has been an improvement in the liaison between the prison and Weymouth local adult social care office which is ensuring Care Act Assessments are being conducted as and when required.

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Challenges to effective safeguarding adults

HMP The Verne is not funded for resettlement but is increasingly releasing prisoners into the community, many prisoners are released to 'Approved Premises' (AP). Due to government policy of reducing sentence served to 40% there has been increased pressure on AP beds. (PCOSO prisoners themselves do not fall within the remit for the 40% reduction but many other individuals who do, are requiring the same AP beds) This has meant that some have not been able to remain in the AP as long as anticipated, which impacts an increased need to find long-term accommodation, with hotels sometimes being used as an interim solution due to difficulties housing ex-offenders. Recall prisoners have reported intentional licence breaches to return to prison as they are finding themselves with no accommodation or unstable accommodation. This presents a risk to them as well as the wider public. 50% of our population is over 50 and we are seeing increased social care and nursing needs as a result. Meanwhile, population pressures mean we are also receiving prisoners from Local B category prisons quicker and much earlier in their sentence. Many of these individuals are neurodivergent, younger and have a history of drug abuse. Thus, the demography of our prison is changing, and we need to adapt practice to this.

Housing Reference Group

In January 2025, a second successful event was hosted by the SABs for Registered Housing Providers, building on previous events and linking in with the 2023-2026 Strategic Plan and Board priorities. There were presentations from:

- 'Recoop' charity - working with older (50+) prisoners, preparing for release and some of the issues in finding suitable accommodation. This was an opportunity for housing providers to learn more and share their experiences and concerns; and for criminal justice professionals to network with housing providers and share good practice.
- Dorset Council & BCP Council - with discussion on pathways for people who self-neglect and for people who hoard.

Reflections on good practice during 2024-2025 included;

✓ Successful engagement with a person – previous failed attempts now working with them and have ongoing support in place.

✓ Developed a productive and improved working relationship with Bournemouth Police.

✓ Vulnerable gentleman struggling in current accommodation, supported to move to a care setting

✓ A Homeless person supported to settle into accommodation

✓ Moved a couple into supported accommodation. Addressing complex Mental Health issues, now in safe and better suited accommodation.

The Housing Reference Group membership continues to grow and focus for 2025-2026 will cover:

- Learning from SARs – discussion and implementation
- Analysis and delivery of Safeguarding training needs
- Continued multi-agency work
- Links to the Prison Service – understanding blocks and barriers
- Tackling social isolation
- Further work on Hoarding and Self-Neglect

Personal Safeguarding Story

Showcasing the work involving staff from the Dorset Safeguarding Adults Team.

Protecting an Older Adult from Abuse through Multi-Agency Collaboration

Background:
P is an 88-year-old woman living alone in Dorset. She has multiple health conditions and was diagnosed with mild dementia following a stroke.
Her relative, who lived nearby in a rented flat, was granted Lasting Power of Attorney (LPA) for both Property & Financial Affairs and Health & Welfare.

Safeguarding Concerns:
Concerns were raised by P's care agency, GP, and Dorset Advocacy regarding the relative's plans to relocate P overseas citing lower care costs. They had made enquiries about her pensions and her ability to undertake long-haul travel.
An investigation by the Adult Safeguarding Team revealed that the relative had misused P's finances for personal purchases, claiming she had consented.

P's Wishes and Capacity:
P was interviewed and, although she denied any wrongdoing by the relative, she clearly objected to moving abroad. She was assessed as having capacity to make decisions about her care and accommodation.

Further Intervention:
In 2025, new concerns emerged when the relative, now living overseas, attempted to sell P's home and arrange her relocation. The Adult Safeguarding Team intervened again, confirming P's continued capacity and her wish to remain in the UK. The house sale was halted.
Allegations of financial abuse and neglect were shared with relevant agencies, including the GP, Dorset Police Safeguarding Hub, and the Council's Finance Team. Safety planning was initiated.

Crisis and Resolution:
Upon returning to the UK, the relative cancelled P's care and threatened her. The Safeguarding Team responded promptly, relocating P to a care home for her protection. There, she disclosed further abusive behaviour by the relative. The relative was arrested and legally barred from contacting P. She revoked his LPA and returned to her home with new care and support arrangements and financial oversight provided by a trusted person.

Outcome:
P remains safe, with her independence and wellbeing supported through coordinated multi-agency safeguarding actions.

Good news stories

Safeguarding Adults Care Team Compliments 2024-2025

"My Mother, sadly passed away on Monday. Thank you to you and your team for all the assistance and support that you provided us throughout our difficult journey, very much appreciated. I had a lot of people to speak with on our journey, that I used to dread having to speak with, but it was always a pleasure to speak with you"

"Thank you ever so much for your help and support with this matter, it is very reassuring for me to know there is support available for the home when need it. Your immediate input made a massive difference with this urgent case"

Received from a School in Dorset, around raising awareness of safeguarding for pupils in 6th Form (following a student report)

"I just wanted to send you this email, to say how grateful R and I are, especially me. I feel so much better talking to you and the Area Practice Manager this morning. It feels like a weight lifted off my shoulders. I am just so grateful that I spoke to you and so is R. I know that R wants his own space and independence. My husband and I will support R always"

Safeguarding Adults

Safeguarding adults is about protecting the rights of people with care and support needs to live in safety, free from abuse, harm and neglect.

If you are concerned about a person who is over the age of 18 years, who has care and support needs, and you feel they are being abused or at risk of abuse from another person, you should seek help for them.

To report a safeguarding concern in the Dorset Council area contact: 01305 221016

During evenings and weekends, telephone:

01305 858250

Thank you for reading our Dorset Safeguarding Adults Board Annual Report 2024-2025
If you would like to get in touch, please do so by the following contact details :

dsab@dorsetcouncil.gov.uk bcpsafeguardingadultsboard@bcpcouncil.gov.uk Tel: 01202 794300

Dorset SAB Website

Safeguarding is everybody's business

NHS Dorset Integrated Care Board

Date of Meeting	19/11/2025
Paper Title	Community Pharmacy Update
Responsible Chief Officer	
Author	Fiona Arnold

Confidentiality	N/A
Publishable Under FOI?	Yes

Community Pharmacy Update

1. Introduction

1.1 This report provides an overview of Community Pharmacy in Dorset, highlighting workforce challenges, pharmacy closures and mitigation strategies, recent good news stories, and the range of services offered.

2. Report

2.1 Workforce

2.1.1 Workforce pressures continue to impact community pharmacies in Dorset, with recruitment and retention challenges. The 2024 Community Pharmacy Workforce Survey provides a comprehensive analysis of workforce trends across community pharmacies in the South West and nationally. The survey categorises staff into Pharmacists (including Independent Prescribers), Foundation Pharmacists, Pharmacy Technicians (including Accuracy Checkers), Other Pharmacy Roles (Dispensing Assistants, Medicine Counter Assistants), and Delivery Drivers. Overall response rate across South West ICBs: 93% Dorset response rate: 86%

2.1.2 Workforce Size & Composition:

- South West Headcount: 8,441 (↓3.5% from 2023)
- FTE per Pharmacy: 6.50 (↑1.3%)
- National Headcount: 98,551 (↓2.6%)
- National FTE per Pharmacy: 6.62 (↓2.3%)
- Vacancy Trends: South West Vacancy Rate: 11.2% (↓30.8%)
- National Vacancy Rate: 12.3% (↓18.0%)

2.1.3 Efforts are underway to support workforce development through training and collaboration across the Dorset system, led the Pharmacy Workforce Faculty. We work collaboratively across all sectors of pharmacy in Dorset to increase trainee pharmacist uptake and retention.

2.1.4 From 2026 all Pharmacists graduating from university will be independent prescribers, Dorset is currently part of the national Independent Prescribing in Community Pharmacy Pathfinder program. We have four sites in Dorset who are providing prescribing clinical consultations for minor acute illness to patients, patient feedback as has been very positive so far.

2.2 Pharmacy Closures

2.2.1 Dorset ICB is aware of the impact that Community Pharmacy closures are having on patients and other services in the area. We are continuing to work with other local Primary Care providers to ensure there is a stable and reliable service for local residents. We have produced patient facing communications to inform patients of their options for accessing pharmaceutical services when their usual pharmacy is closed. The ICB is also taking formal contractual action relating to the pharmacy closures.

2.3 Pharmacy Services

2.3.1 Community pharmacies in Dorset provide a wide range of services in addition to the essential services they are required to provide as part of their standard contract.

2.3.2 We have 139 contracts in Dorset, 133 bricks and mortar pharmacies, 3 distance selling pharmacies and 3 dispensing appliance contractors.

2.3.3 We have good coverage for delivery of the three national clinical services: 131 pharmacies delivering Oral Contraception Service, 131 delivering the Hypertension Case Finding Service and 126 delivering the Pharmacy First Service. Around 9,000 patients per month are accessing these services from pharmacies in Dorset, this is increasing patient access to healthcare out in the community and delivery of neighbourhood health.

2.3.4 Dorset ICB works collaboratively with all system partners to increase utilisation of these services across the county.

Author's name and title: Fiona Arnold Community Pharmacy Clinical Lead

Date: 11/11/2025

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