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PEOPLE AND HEALTH OVERVIEW COMMITTEE

MINUTES OF MEETING HELD ON MONDAY 2 FEBRUARY 2026

Present: Cllrs Louise Bown (Chair), Jindy Atwal (Vice-Chair), Beryl Ezzard, Alex Fuhrmann, Ryan Holloway, Stella Jones, Steve Murcer, Jon Orrell, Mike Parkes and Byron Quayle

Also present: Cllr Steve Robinson, Cllr Jane Somper, Cllr Gill Taylor and Cllr James Vitali

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

George Dare (Senior Democratic and Governance Officer), Rachel Partridge (Deputy Director of Public Health), Sam Poole (Interim Corporate Director for Commissioning & Improvement), Jonathan Price (Executive Director of People - Adults and Housing), Iain Sim (Interim Corporate Director for Housing), Tony McDougal (Communications Business Partner - Adults and Housing), Sharon Attwater (Service Manager for Housing Strategy and Performance), Sarah How (Service Manager for Housing Register and Lettings), Sarah Longdon (Head of Service Planning) and Sarah Perrett (Commissioning Manager)

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

Sarah Smith (Housing Strategy Lead)

30. **Apologies**

There were no apologies for absence.

31. **Declarations of Interest**

There were no declarations of interested.

32. **Minutes**

The minutes of the meeting held on 15 September 2025 were confirmed and signed.

33. **Public Participation**

There was no public participation.

34. **Councillor Questions**

There were no questions from councillors.

35. Urgent Items

There were no urgent items.

36. Health and Wellbeing Board Strategy Development

The Cabinet Member for Adult Social Care, who chairs the Health and Wellbeing Board, introduced the item. He outlined the purpose of the Health and Wellbeing Board and the role it could have within the upcoming NHS Integrated Care Board (ICB) cluster arrangements.

The Deputy Director of Public Health and Prevention gave a presentation to the committee which considered the context, current position and opportunities for the development of the Health and Wellbeing Board Strategy. The presentation is attached as an appendix to these minutes.

The committee and non-committee members discussed the report and asked questions of the officers and Cabinet Member. The following points were raised during the discussion:

- The NHS would be involved with this work, as the Health & Wellbeing Board's vice-chair is an NHS representative. There are also regular meetings between senior officers of the council and NHS to ensure there was alignment.
- The ICB cluster arrangements and commissioning arrangements for local places had not yet been finalised. If local place commissioning was through the Health and Wellbeing Board, this would enable more democratic accountability and scrutiny.
- Examples of the topics likely to be in the Health & Wellbeing Strategy would be living well, ageing well, healthy life expectancy and leaving hospital. However, the topics would be developed as the strategy develops.
- The strategy would need to help encourage an NHS culture shift from sickness to prevention and reducing health inequalities. The Better Care Fund could be used as a method of redistributing funding into communities.

The committee discussed the next steps and future oversight for the development of the Health and Wellbeing Board strategy and requested a progress update and review in 6 months.

Proposed Cllr Jones, seconded by Cllr Holloway.

Decision:

That

- a) The proposed approach to developing the strategy and outcomes framework the Health and Wellbeing Board, be supported.

- b) The direction of travel with the Board overseeing the development of prevention-focused integrated care, working through a place-based partnership approach, be endorsed.
- c) The establishment of the Internal Dorset Council Prevention Steering Group (officers) and External Reference Group for partners, community representatives and Members, be noted. Both of these groups will be supported by a task focused product team to deliver the strategy content and outcomes framework.

37. **Towards a new model of day opportunities**

The Cabinet Member for Adult Social Care introduced the report. He thanked people for taking part in the public consultation and said that the outcomes of the consultation have helped shape the future intention for day opportunities.

Members discussed the report and raised the following points:

- Ferndown was previously identified to close but now the new plan for Ferndown was broadly supported. There was concern that opening a community hub in Ferndown would compete with other community facilities.
- The report had been revised following a conversation about Ferndown. There were still further opportunities to ensure that community work in the area was complimented and not replaced.
- The council has a duty to ensure that peoples needs are met in practice, however a lack of public transport prevents people from accessing day opportunities. Direct payments could be used to help people source their own transport, but this could put further pressure on families and carers.
- There would be a move in focus away from people going to buildings, to providing services in communities closer to where people live. A balance between continuity and innovation was needed so people already receiving day services were not distressed.
- The report was on current day services provision, so Gillingham was not included. Information on day opportunities already available in Gillingham would be shared with members.
- References to a 'hub and spoke model' needed to be reviewed so it was easier for service users to understand.

Proposed by Cllr Ezzard, seconded by Cllr Jones.

Decision:

That the draft Cabinet report and future intentions for day opportunities be supported.

38. **Dorset Council Housing Allocation Policy**

The Corporate Director for Housing and Community Safety introduced the report and outlined the purpose of the allocations policy. The policy would remain similar to the current policy, however there were some amendments and changes which were listed in an appendix to the report.

Since publication of the report, an issue was identified with section 4.15 of the report. The Corporate Director suggested an amendment to the committee to provide information on ownership of a property through a company or shares. The Committee agreed to including this amendment in a recommendation to Cabinet.

Members discussed the report and asked questions of the officers. The following points were raised:

- Whether registered providers can turn down people on the housing register. Registered providers could do this in some circumstances although the reasons need to be explained to the council. It was rare for this to happen.
- The statutory guidance for bedroom standards and how house sizes are assessed for families.
- The £60k income and the savings limit were not means-tested following allocation of a property.
- The income limit of £60k was a common number across local authorities and was suggested by the government as a reasonable threshold. Only 45 people on the housing register of approximately 7000 people were earning between £50 – 60k.
- Reassessment of approximately 2000 applicants on the housing register would need to take place and would be undertaken with support from temporary staff.
- Implementation of this new allocation policy would likely have a marginal impact on the waiting list for housing.

During the discussion, the committee considered recommendations for amendments to the draft policy. The following recommendations were made:

Proposed by Cllr Quayle, seconded by Cllr Parkes.

Recommendation: To replace ‘any English local authority’ with ‘any UK local authority’ in section 4.14 – moving to Dorset for work or an apprenticeship.

Proposed by Cllr Furhmann, seconded by Cllr Holloway.

Recommendation: To replace ‘a minimum of two years’ with ‘a minimum of five years’ in section 4.12 – association with close family.

Proposed by Cllr Furhmann, seconded by Cllr Bown.

Recommendation: To amend section 4.15 to add ‘or assets’ after ‘having £16,000 or more of savings’.

Following the discussion and making recommendations to Cabinet, the committee considered the recommendations in the report.

Proposed by Cllr Furhmann, seconded by Cllr Atwal.

Decision: To recommend to Cabinet that the Housing Allocations Policy 2026 – 2031 be recommended to Full Council for approval.

39. **Dorset Tenancy Strategy**

The Corporate Director for Housing and Community Safety introduced the report. Producing a Tenancy Strategy was a statutory requirement for the council. The purpose of the strategy and the role of the council in social housing tenancies was outlined. Housing registered providers had a duty to cooperate with the Housing Authority.

Cllr Fuhrmann proposed an amendment, which was agreed by the committee, to provide additional clarification to section 5.3 of the strategy. The amended part of the section would read as follows:

We welcome an approach where any breaches of tenancy (for example rent arrears, anti-social behaviour and damaging property) are dealt with under the normal possession process, allowing a court to consider the case. We expect registered providers to avoid including tenant rent arrears in decisions on tenancy renewals. We expect registered providers to prioritise other methods to resolve rent arrears.

We also expect registered providers to avoid including complaints due to antisocial behaviour in decisions on tenancy renewals. In exceptional circumstances, if registered providers do consider non-renewal of tenancy because of antisocial behaviour, we expect that community care needs (e.g. social care needs, domiciliary care needs, health care needs, etc.) are included in any assessment.

There was no further discussion on the strategy.

Proposed by Cllr Jones, seconded by Cllr Atwal.

Decision:

That the Dorset Tenancy Strategy 2026 – 2031 and the amendment be recommended to Cabinet for approval.

40. **Committee's Work Programme and Executive Forward Plans**

The Housing Standards Enforcement Policy and Statement of Principles for Determining Financial Penalties would be considered at an additional People & Health Overview Committee meeting on 16 March.

The committee noted the work programme.

41. **Exempt Business**

There was no exempt business.

Duration of meeting: 6.30 - 9.12 pm

Chairman

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Dorset
Council

Health and Wellbeing Board Strategy Development

People and Health Overview Committee 2 February 2026

Context

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- Health and Wellbeing Board has a primary purpose as a partnership board – LA, NHS, VCS, Healthwatch, DWFRS
- Responsible for promoting **integration** and **prevention**
- Statutory functions including needs assessment to help build a **strategy**, oversight of **Better Care Fund**, pharmacy needs assessment
- **NHS Dorset ICB is changing** – ICB will be a cluster operating as a more strategic commissioner from April 2026
- **More focus on place-based commissioning** on the Dorset Council geography (along with 5 other ‘places’ in Wessex)

Current position

- This paper sets out an approach to building the new strategy for the Health and Wellbeing Board
- Taking a co-production approach – testing and learning as we go
- External involvement of partners through the process
- Internal connection within Dorset Council across all directorates
- Will develop a clear outcomes framework and indicators to support monitoring of improvement
- Strategy should also include major change programmes – such as family hubs, best start in life, Working age adults, public health provision, and Future Care

Opportunities

- Provides clear steer on priorities, focus for improvement for our place, working closely with Neighbourhood health plans of the NHS
- Allows Board oversight and visibility of major change programmes
- Ability to report on progress through clear outcomes framework
- Develop joined up services, and clearer investment in prevention approaches
- Clearer benefits for residents in Dorset Council from joint working
- Work differently to support delivery of council plan priorities under Communities for All

Recommendations

- Asking Committee to support the approach to strategy development
- Endorse HWB overseeing development of prevention focused, joined up care via a partnership approach
- Note the establishment of an internal steering group and external reference group to oversee production

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