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CABINET

MINUTES OF MEETING HELD ON TUESDAY 25 FEBRUARY 2025

Present: Cllrs Nick Ireland (Chair), Richard Biggs (Vice-Chair), Jon Andrews, Shane Bartlett, Simon Clifford, Ryan Hope, Steve Robinson, Clare Sutton, Gill Taylor and Ben Wilson

Also present: Cllr Sherry Jespersen, Cllr Toni Coombs, Cllr Hannah Hobbs-Chell, Cllr Rob Hughes, Cllr Steve Murcer and Cllr Jane Somper

Also present remotely: Cllr Jack Jeanes, Cllr Mike Baker, Cllr Belinda Bawden, Cllr Laura Beddow, Cllr Alex Brenton, Cllr Ray Bryan, Cllr Richard Crabb, Cllr Barry Goringe, Cllr Stella Jones, Cllr Chris Kippax, Cllr Cathy Lugg, Cllr David Morgan, Cllr Andrew Parry and Cllr Kate Wheller

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

Jan Britton (Executive Director for Places Services), Matt Prosser (Chief Executive), Kate Critchel (Senior Democratic Services Officer), George Dare (Senior Democratic Services Officer), Andrew Billany (Corporate Director for Housing), Sam Crowe (Interim Chief Executive), Julia Ingram (Corporate Director for Adult Social Care Operations), Beth Whittaker (Interim Corporate Director for Education and Learning), Aidan Dunn (Executive Director - Corporate Development S151), Jonathan Mair (Director of Legal and Democratic and Monitoring Officer), James Ailward (Head of ICT Operations), Ed Denham (School Admissions Manager) and Terry Sneller (Strategic Planning Manager)

120. **Minutes**

The minutes of the meeting held on 28 January 2025 were confirmed as a correct record and signed by the Chair.

121. **Declarations of Interest**

The Leader of the Council declared an interest in respect of min 129 as his employer may possibly tender a bid for this work. He indicated that he would leave the meeting, whilst the item was considered.

122. **Public Participation**

There were 2 questions from the public. A copy of the full questions and the detailed responses are set out in Appendix 1 to these minutes.

123. **Questions from Councillors**

There was one question from Councillor G Taylor; this along with the response are set out in Appendix 2 to these minutes.

In response to Cllr Taylor's question and as the Chair of the People & Health Scrutiny Committee, Cllr T Coombes indicated that she would ask officers to carry out some scoping on this matter, however due to the current national circumstances, it might not be brought forward for consideration in the immediate future.

124. Forward Plan

The Cabinet Forward Plan for March was received and noted.

125. Public health disaggregation: progress and overview of key decisions

The Cabinet Member for Health and Housing set out a report that provided an overview on the progress with disaggregation of the shared public health service and the establishment of two new separate teams. The Council had now appointed a Director of Public Health and Prevention who will lead on public health and community and public protection functions for the Dorset Council area.

A similar paper has been considered and approved by BCP Council and there were a number of key decisions for Cabinet, and these were set out in detail in the appendix to the report.

In response to questions, the Director of Public Health and Prevention confirmed that there was still a lot of work to be carried out by both public health directors in considering how two public health teams will operate in their respective councils. The question of how the service interacted with councillor oversight and scrutiny was still under consideration, as it was important that members saw the full scope of the public health function. In the meantime, he was happy to continue to meet with individual councillors.

In response to a further question, the Director of Public Health and Prevention confirmed that rough sleeper grants were to be led by a 3rd sector provider.

It was proposed by Cllr G Taylor and seconded by Cllr C Sutton.

Decision

- (a) That Cabinet recognised and supported the work done to date to disaggregate the shared public health service, following BCP Council's decision to terminate the agreement in April 2024.
- (b) That Cabinet endorse the decisions set out in appendix A (of the report) that the steering group was proposing to take, recognising the pragmatic approach adopted in order to maintain positive working relationships, financial stability and service provision to residents.

Reason for the decision

To ensure continued provision of efficient, equitable and effective public health services for both councils, in line with the requirements of the Health and Social Care Act 2012.

126. Local Plan Local Development Scheme update

The Cabinet Member for Planning and Emergency Planning presented an update on the Local Development Scheme to establish a timetable to produce the Dorset Council Local Plan, the Dorset Council Minerals Plan, the Dorset Council Waste Plan, various neighbourhood plans and other planning policy documents, as required by central government by 6 March 2025.

Transitional arrangements had been put in place for the local plans being produced under the current plan-making system and these arrangements had set a target for Dorset of submitting the local plan for examination by December 2026. Even though the deadline of December 2026 was ambitious, members supported the need to have the Dorset Council Local Plan in place as soon as was possible.

In response to a question around design code and village design statements, the Cabinet Member for Planning and Emergency Planning confirmed that a cross-party meeting would shortly be arranged to discuss design codes.

It was proposed by Cllr S Bartlett seconded by Cllr R Biggs

Decision

- (a) Cabinet agreed that the current plan-making system continued, and this was to be reviewed at the point the new plan-making system was in place.
- (b) That the revised Local Development Scheme and key programme milestones for development plan preparation contained within it be agreed, and to bring this into effect on 5 March 2025.
- (c) That the Local Development Scheme be published on the Dorset Council website.
- (d) That a copy of the Local Development Scheme be submitted to the Ministry for Housing, Communities and Local Government by 6 March 2025, to comply with the request from the Deputy Prime Minister.
- (e) Cabinet agree to continue to produce a Local Plan separate from the Minerals plan and Waste plan but to undertake a review of this approach once the new plan-making system was introduced.

Reason for the decision

To respond to the request from the Deputy Prime Minister for all Local Planning Authorities to update their Local Development Scheme within 12 weeks of the publication of the revised National Planning Policy Framework. The revised Local Development Scheme needed to be agreed with a copy being sent to the Ministry for Housing, Communities and Local Government by 6 March 2025.

127. **Fontmell Magna Neighbourhood Plan**

The Cabinet Member for Planning and Emergency Planning presented the report and the recommendation to make the modified Fontmell Magna neighbourhood plan and congratulated all those involved in producing the plan.

Cllr J Somper, the local ward member spoke in support of the plan and the report's recommendation.

It was proposed by Cllr S Bartlett and seconded by Cllr S Clifford

Decision

- (a) That the Council makes the Modified Fontmell Magna neighbourhood Plan 2017 – 2031 (as set out in Appendix A, of the report) part of the statutory development plan for the Fontmell Magna Neighbourhood Plan,
- (b) That the Council offers its congratulations to Fontmell Magna Parish Council and members of the Neighbourhood Plan Group in producing a successful neighbourhood plan review.

Reason for the decision

To formally make the modified neighbourhood plan part of the statutory development plan for the Fontmell Magna Neighbourhood Area. In addition, to recognise the significant amount of work undertaken by the Parish Council and members of the Neighbourhood Plan Group in preparing the plan review and to congratulate the Council and the Group on their success.

128. **Determination of School Admissions Arrangement 2026 - 2027**

The Cabinet Member for Children's Services, Education & Skills set out the annual report that asked members to support proposed changes in Pupil Admissions Number (PAN) for Gillingham School, Hazelbury Bryan Primary School and Greenford Primary School.

It was proposed by Cllr C Sutton and seconded by Cllr S Robinson

Decision

That the following policies that make up Dorset Council's School Admissions Arrangements and Coordinated Scheme for school place allocations for September 2026, be approved and adopted

- (a) Co-ordinated Admissions Scheme Timetable 2026-2027
- (b) Primary Co-ordinated Scheme 2026-2027
- (c) Secondary Co-ordinated Scheme 2026-2027
- (d) In Year Co-ordinated Scheme 2026-2027
- (e) Admissions Arrangements for Community & Voluntary Controlled Schools 2026-2027.
- (f) Admissions to Maintained Nursery Units Policy 2026-2027
- (g) Sixth Form Admissions Policy 2026-2027

(h) Armed Forces Policy 2026-2027

In addition, the following reductions in Pupil Admissions Number be approved:

- (i) Gillingham School reduction of their Pupil Admissions Number from 280 to 270 with effect from September 2026.
- (j) Sturminster Marshall First School reduction of their Pupil Admissions Number (PAN) from 30 to 15 with effect from September 2026.
- (k) Hazelbury Bryan Primary School reduction of their Pupil Admissions Number (PAN) from 17 to 15 with effect from September 2026.
- (l) Greenford Primary School reduction of their Pupil Admissions Number (PAN) from 25 to 20 with effect from September 2026.

Reason for the decision

To determine admissions arrangements in accordance with statutory requirements including the Schools Admissions Code September 2021.

To ensure compliance with the latest legislation and any subsequent regulation/statutory guidance.

The Leader of the Council left the room for consideration of the following item.

129. **Enterprise Resource Planning System (Outline Business Case)**

Cllr B Wilson, the Cabinet Member for Corporate Development and Transformation updated Cabinet on the enterprise resource planning replacement programme (ERP). The ERP was the core system used by the Council for finance, human resources, payroll and procurement and the project was an integral part of the broader Our Future Council (OFC) transformation programme.

He further advised that the current system had been in place since 2009, and this would become “end of life” in December 2027. This meant that the product would no longer receive functionality or security updates and would pose an unacceptable level of future cyber risk. There were four options for consideration set out in the paper and the Cabinet Member recommended to Cabinet the option to replace the current system with a new ERP system that would align with the transformation programme.

The Cabinet Member, Executive Director for Corporate Development and Hed of ICT Operations responded to questions on operating costs, risk, impact on the organisation and the life cycle of any new product procured by the Council.

Members recognised the risk in introducing a new solution, but the risk of doing nothing was greater in terms of cyber protection.

It was proposed by Cllr B Wilson seconded by Cllr J Andrews

Decision

That authority be delegated to the Executive Director of Place, in consultation with the Cabinet Member for Corporate Development and Transformation, to

commence the procurement of an Enterprise Resource Planning (ERP) solution, with the approval of contract award to be subject to a future report to Cabinet (estimated May/June 2025 with Full Business Case)

Reason for the decision

Dorset Council's ways of working and financial sustainability required core business processes, across our HR, finance and procurement functions, that were transformed to improve the user and customer experience; to improve the quality and availability of rich data and insights to inform strategic planning and operational delivery; and to take advantage of the opportunity to adopt automation and artificial intelligence to streamline processes to make them more agile and less costly to operate.

In addition, the incumbent SAP solution would become 'end of life' in December 2027, meaning the product would no longer receive functionality or security updates.

130. **Urgent items**

There were no urgent items considered at the meeting.

131. **Exempt Business**

There was no exempt business scheduled at this meeting.

Public Q&A's

Councillor Q&A's

Duration of meeting: 6.30 - 7.46 pm

Chair

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Cabinet

25 February 2025

Public Questions

Question from Mr Robert Horne

The background

I hold joint Power of Attorney for an elderly Dorchester resident with dementia. After two months in acute care for a leg injury she was discharged by Dorset County Hospital in May 2024 to a residential care home in Dorchester. That care home could not meet her care needs and neither could a second one from which we moved her to a nursing home in January 2025. In October 2024 we asked for her eligibility for NHS Continuing Health Care (CHC) to be assessed.

A Multidisciplinary Team (MDT), which included a CHC Social Worker employed by Dorset Council, conducted the Decision Support Tool (DST) assessment in October 2024. The MDT recommended she was eligible for CHC but in December we were informed that NHS Dorset denied eligibility.

The regulations

- NHS Dorset is an Integrated Care Board (ICB) subject the ***National Health Service Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012*** issued under the ***National Health Service Act 2006***. Regulation 22 is entitled ***Duty of relevant bodies: joint working with social services authorities***.
- The 2012 regulations require an ICB to comply with the ***National Framework for NHS Continuing Healthcare and NHS funded Nursing Care 2022*** which sets out the DST procedure in Practice Guidance under the heading ***What are the elements of a good multidisciplinary assessment of needs?*** in Section PG 21.
- Within PG 21 is this clause:-

21.4 ICBs and local authorities should consider agreeing joint models of assessment documentation and having regular training or awareness events to support them.

The joint model

The implicit purpose of a joint model is to avoid an MDT producing a DST that is open to review by an ICB applying a differing interpretation of the evidence when making its decision on eligibility for CHC.

In the case of the person for whom I hold Power of Attorney, the existence of a properly effective joint model with both the MDT members and the ICB staff trained in its operation would have avoided a disagreement over the interpretation of evidence. The DST process would not have been prolonged by more than a month and I would be unlikely to have grounds for lodging an appeal against the decision of the ICB to deny CHC.

The current version of the National Framework came into effect in July 2022 since when its guidance and advisory provisions should have been considered and, where deemed appropriate, implemented.

My question to the Cabinet

Has Dorchester Council considered agreeing with NHS Dorset a joint model of assessment?

Response of the Cabinet Member for Adult Social Care

Thank you for your question-

Firstly may I offer my personal appreciation for the role you have taken on. Power of Attorney is a commitment that is a true demonstration of love and compassion, not just from family members, but sometimes between lifelong friends who are there for each other in the hardest of times.

In response to your question I can confirm that Dorset Council (not Dorchester Council) does support the joint assessment process through being involved in contributing to the Decision Support Tool (DST) which is the joint assessment tool used by the multi-disciplinary team to provide a **recommendation** to the NHS on eligibility for Continuing Healthcare. Dorset Council Adult Social Care has developed a dedicated CHC hub through which we carry out our assessment activity for CHC. and the Adult Social Care practitioners therefore attending these DST meetings are trained and experienced in CHC.

However, within the Integrated Care Board, NHS Dorset retains the final decision-making responsibility regarding NHS Continuing Healthcare eligibility. These eligibility decisions should be based on the **recommendation** made by the multidisciplinary team, in accordance with the process set out in the National Framework. The National Framework states that **only in exceptional circumstances, and for clearly articulated reasons, should the multidisciplinary team's recommendation not be followed.** There is a 6 month period following a CHC outcome for people to submit an appeal of the eligibility decision to NHS Dorset.

There is clearly still some considerable work to be done in this area and Dorset Council are currently advocating at Government level for a better recognition of the people of Dorset in a number of areas, of which this is one.

Question from David Redgewell, Southwest Transport Network Dorset catch the bus campaign

With the government allocation of the bus services improvement plan bus Grant 2025 2026 of £ 3.8

We're are disappointed with about of money compared with Devon £ 11 million and £ 10 million pounds this should be raised with county mps .

By we are concern that under Department for transport funding regulation their should be Bus advisory Board meetings with consultation with bus forum before decision are made.

Since the new administration took over

We had no forum meeting.

First Group plc South buses are changing timetables in June 2025 x53

Is an example changing the 1915 from Axminster railway station to Lyme Regis Bridport bus and coach station to Weymouth kings statue arrive at 21 11

Meeting First group plc MTR South western railway company Ltd FROM Exeter Central and London Waterloo Axminster station.

National railway from may 20 25 DFT rail

But will in June depart at 1855 miss the trains and intergrated Transport connection UK government policy.

Will the council now call bus users Forum to carry out passengers and stakeholders consultation with Dorset Public Transport unit First group plc buses and Trains go ahead group South coast buses. National Express coaches and others western Gateway Transport Board ect .

Response of the Cabinet Member for Place Services

Thank you for your question.

We share the disappointment regarding Dorset Council's allocated bus grant funding. We have provided written evidence to the Transport Select Committee inquiry Buses Connecting Communities and have highlighted the disparity of funding within the South West. We will continue to raise the issue of fairer bus funding for Dorset at every opportunity.

I have recently asked Cllr. Derek Beer to Chair the Bus User and Stakeholder (BUS) Group. We are in the process of setting a date for the next BUS group meeting and invites will be sent out shortly. This will give local groups the opportunity to explore issues with the council and local bus operators. Future BUS group meetings will be held twice a year.

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Cabinet

25 February 2025

Questions submitted by Councillors

Question from Cllr Gill Taylor

NHS Continuing Healthcare (NHS CHC) is a package of care for adults aged 18 or over which is arranged and funded solely by the NHS. In order to receive NHS CHC funding individuals, have to be assessed by integrated commissioning boards (ICBs) according to a legally prescribed decision making process to determine whether the individual has a 'primary health need'.

The initial application is carried out with a health care professional, there is then an assessment to decide if there are grounds to progress the application. There are several routes to apply depending on need but many residents apply through the Standard NHS CHC route. Nationally the conversion rate for this is around 20%, it is a post code lottery and I'm pleased to say Dorset is higher than the national average at 34%. This does however mean that 66% of applications are turned down. (Q1 24/25 figures)

For residents who go through the application process, it is really traumatic when they are already dealing with a very difficult situation. I'm saying this from personal experience. When the applicant is self funding it means that, if refused, they will get no financial assistance with the health care aspects of care.

For residents who are not self funding, there is an impact on the budget of Adult Services. The needs of the client are assessed and where necessary they are supported in applying for CHC. If they are turned down, as 66% of them are, the council is liable for the cost of all their ongoing care.

Due to my personal circumstances, I speak to many health care professionals who have given me anecdotal stories of residents they are trying to help being refused.

I understand that concerns have been raised from a member of the public whose mother has applied for CHC and also from the MP for West Dorset.

I have previously asked for this issue to be scrutinised by the People and Health Scrutiny Committee due to the impact it is having on self funding residents and the Dorset Council and I ask the Cabinet Member for Adult Social Care to make this request again.

Response by Cllr S Robinson

Thank you for your question. As Cabinet member for Adult Social Care I recognise the challenges this presents for families when the person they care for is assessed as not being eligible for NHS Continuing Health Care.

The threshold for people to apply for consideration for CHC eligibility, the national checklist tool, is intentionally lower than the CHC criteria itself. This is to make sure that people are not excluded from applying and getting the full consideration at the Decision Support Tool stage. There will always sadly therefore be a percentage of people who are considered for CHC who are likely not to be eligible.

Adult Social Care in Dorset is currently working with colleagues in BCP and the ICB to agree a joint funding policy for people who the Local Authorities fund have health needs but who are not CHC eligible. The work on the position for people who fund their own care is not currently part of this work. I would be very happy to make representation for this issue to be scrutinised by the People and Health Scrutiny Committee due to the impact it is having on self-funding residents across Dorset.