**Date of Meeting:** 26th June 2019  
**Lead Member:** Councillor Laura Miller – Lead Member for Adult Social Care and Health  
**Lead Officer:** Dr Jane Horne, Public Health Dorset

<table>
<thead>
<tr>
<th><strong>Executive Summary:</strong></th>
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<tr>
<td>The paper provides a written update to the Board on:</td>
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<tr>
<td>• Key highlights from across the STP as a whole;</td>
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<tr>
<td>• Progress on Prevention at Scale since the March Board.</td>
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<th><strong>Equalities Impact Assessment:</strong></th>
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<tr>
<td>Some elements of the STP have had an EqIA.</td>
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<th><strong>Budget:</strong></th>
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| The Joint Public Health Board has previously approved approx. £1m non-recurrent funding from savings made from the public health grant for investment into the PAS programme. A further £150k has been allocated for non-recurrent project resource from the STP transformation fund.  
Partner organisations each commission and work on a range of prevention activities with associated budgets. As the PAS work progresses there may be additional impacts on these. |

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<tr>
<th><strong>Risk Assessment:</strong></th>
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| Having considered the risks associated with this decision, the level of risk has been identified as:  
Current Risk: LOW  
Residual Risk: LOW |

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<th><strong>Other Implications:</strong></th>
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<td>The ambition set out in the STP is to transform health and care in our area to achieve better health outcomes for local people, with higher quality care that's financed in a sustainable way. There are five key strands of work including PAS to support the NHS and local councils in how they work together to address the three gaps around:</td>
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<tr>
<td>• Health and wellbeing gap</td>
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<tr>
<td>• Care and quality gap</td>
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<td>• Finance and affordability gap</td>
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By developing the STP as the Joint Health and Wellbeing Strategy was refreshed there is close alignment, and the Health and Wellbeing Board has the role of overseeing local delivery of the PAS portfolio.

Wider implications of the STP and the PAS programme include the sustainability of future public services, and the future role of localities, communities and the voluntary sector.

**Recommendation:**

Members are asked to note the update on STP highlights and highlighted progress on prevention at scale; and to support ongoing work, within the Board and back in their respective organisations and communities.

**Reason for Recommendation:**

Transformation of health and care services in Dorset needs close collaboration between all public service partners. The Health and Wellbeing Board has a key role in this and has specifically taken on the role of overseeing local delivery of the PAS portfolio. The Board have requested an update on the STP as a whole, with a focus on the delivery of PAS for all future meetings.

**Appendices:**

Appendix 1 – Prevention at Scale activities in localities

**Background Papers:**

‘Our Dorset’
Joint Health and Wellbeing Board Strategy
Update on STP and PAS, Health and Wellbeing Board – March 2019

**Officer Contact**
Name: Jane Horne
Tel: 01305 225872
Email: j.horne@dorsetcc.gov.uk

1. **PURPOSE OF REPORT**

1.1 This paper provides a written update to the Board on headline progress across the Dorset Integrated Care System (ICS), and the STP as a whole; feeds back on progress since the last Board; and provides a particular focus on work ongoing in the localities.

2. **BACKGROUND**

2.1 ‘Our Dorset’, the local STP published in 2016, set out five key strands of work including Prevention at Scale to support the NHS and local Councils in working together to address three gaps:

- Health and wellbeing gap
- Care and quality gap
- Finance and affordability gap

2.2 The Joint Health and Wellbeing Board Strategy, adopted in August 2016, outlines three key priorities for the Board (starting, living and ageing well). Developing the STP
and the JHWS at the same time meant close alignment on prevention at scale, and the Health and Wellbeing Board oversees local delivery of this portfolio.

2.3 The Board receives regular updates on the STP and progress with prevention at scale plans. At each meeting the Board also has the opportunity for a more in-depth discussion. At the March meeting this focused on work on activity in all the localities and what is being done to support staff health and wellbeing.

3. ICS/STP HIGHLIGHTS

3.1 NHSE stage 2 assurance of the Dorset ICS dementia services review is now complete.

3.2 Primary Care Network (PCN) development and mobilisation is underway. 18 PCNs submitted registration documents to the CCG. The map below shows rough geographical alignment of the PCNs. The national PCN Directed Enhanced Service should go live on 1 July.

![Map of PCNs](image)

3.3 A short life task and finish group is exploring potential system collaboration to address the issue of key worker housing/accommodation for the health and care workforce.

3.4 Fifty registered nurse degree apprenticeships to start in September 2019 are being funded, supported through Leading and Working Differently. More than 200 applications were submitted, the process of selection is underway.

4. PREVENTION AT SCALE

High level progress

4.1 The new Primary Care Contract, PCN development and the CCG Clinical Commissioning Local Improvement Planning (CCLIP) service bring new opportunities to connect the Integrated Community and Primary Care Services (ICPC) and
Prevention at Scale work together. Locality link workers are supporting developing PCNs with their plans.

4.2 With the two new councils established and members elected, new opportunities will arise to embed prevention within the transformation work. We have begun initial conversations through the Dorset Council change board.

Starting Well

4.3 14 Mental Health First Aid (MHFA) school-facing 2-day courses have been delivered in Dorset with the last course being held in April 2019. Over the 14 courses, 196 delegates have been trained as mental health first aiders with 50 of these being non-target workforce groups (e.g. teacher, teaching assistant, ELSA, school-based staff). One month follow up evaluation reviews have been collated, with 29 responses. From the survey, 100% agreed that their knowledge of young people’s mental health issues had increased, 93% had identified situations where MHFA knowledge could be applied to support young people, and 100% felt confident to have conversations about mental health issues with colleagues and young people.

4.4 All schools with successful bids for The Whole School Approach (WSA) project have now received the funding. External consultancy for evaluation has been awarded to two organisations, and the evaluation will be split into two elements with each consultant managing one of each:

- Plymouth University – capacity building (knowledge, understanding, and skill developing) for school staff leading on WSA
- UxClinician – process evaluation with stakeholders and partners involved with design and development of WSA learning to share.

4.5 A Young People counselling task and finish group has been set up to complete a school-based counselling service review and service development. The group has requested an audit with all schools and schools will be provided with an online survey to include an audit of the current counselling provision, needs analysis of potential provision required and interest in developing frameworks for schools to use. The survey is currently being agreed by the group and is expected to be disseminated in schools in early September 2019.

4.6 NHS England are leading a piece of work on variation in childhood immunisation rates, with a particular focus on working with GP surgeries on improving uptake of the second dose of Measles, Mumps and Rubella vaccine (MMR2).

4.7 A meeting has taken place with local authority leads for Children’s Centres and Family Partnership Zone to explore training requirements for staff to increase opportunities to have meaningful conversations with mothers and families in these settings around the public health agenda. The initial focus will be on smoking cessation but may be expanded.

4.8 A Phase 2 and 3 Expression of Interest has been submitted to the Dorset Children and Young People Emotional Wellbeing network group (THRIVE) to develop mental health teams for schools. The pilot areas are to be North Dorset and Weymouth and Portland.

Living Well
4.9 LiveWell Dorset was brought in-house in 2018/19 to be directly managed and delivered by Public Health Dorset. A record high 6,600 people used the LiveWell service during the last year, bringing the total of number supported to more than 25,000. There are positive rates of engagement in the areas of highest need with 27% of service users living in the 20% most deprived communities. Last year saw the full launch of the new digital LiveWell offer and with 8,000 website visits and 500 registrations per month. Outcome data suggests the service remains effective. Of those people who report outcomes at 12 months, most sustain positive changes in their target behaviour of smoking (42% quit), weight (57% maintain 5% weight loss), physical activity (67% more active) and alcohol (70% drinking less). The service has recently published the service plan for 2019/20 which can be requested or downloaded as a pdf document on the Public Health Dorset website.

4.10 A mental health first aid instructor training programme was commissioned in Dorset offering eleven places to the health, social care and voluntary sectors. There are new instructors within Dorset Council (one), LiveWell Dorset (one), Dorset County Hospital (two), Dorset Healthcare (two) and Dorset Wildlife Trust (one). The trainers have been pairing up to deliver two mental health first aider courses to the workforce which will enable them to become fully accredited trainers within our system.

4.11 Dorset County Hospital have embraced the offer of “insights” workshops, to date over 100 staff from 9 different teams have fed in their thoughts about wellbeing within the organisation. These findings have been captured in a themed wellbeing report for the hospital. These workshops have received positive feedback from the participants as well as the OD and wellbeing leads.

4.12 Workforce wellbeing meetings have been held between the new Dorset Council senior leadership team and Interim Director of Public Health and Public Health consultant for workforce development.

4.13 A Dorset Council Wellbeing group has been set up to develop a physical health offer for Dorset Council staff; this is exploring provision of a “health check” offer, better supporting muscular skeletal health and increasing physical activity in the pre-retirement population. The Dorset Council Wellbeing group is also working on an employee’s wellbeing strategy for Dorset Council.

Ageing Well

4.14 The cohort of GP practices who completed the Collaborative Practice Leadership Programme in 2018/19, have all recruited and trained their Practice Health Champions equating to 236 individuals across Dorset. The average recruitment to uptake response rate for Dorset was 3.5% with 77,896 text invitations sent to practice populations in the last 12 months. Non-clinical offers of support and activities such as art and craft therapy sessions, carers support groups and choir are becoming embedded in the practices. Many practice champions are also producing local directories, developing their own social “prescriptions”, helping with flu clinics and suggesting and implementing changes to waiting areas.

4.15 A second Collaborative Practice Leadership Programme has started with 9 new practices represented, including a group that will be looking to work as a network in growing the champion work, and a newly formed federated group of practices, providing an opportunity to develop and test the ‘at scale’ approach to the process.
4.16 Public Health Dorset have submitted an application for the Collaborative Practice project to the RSPH Health and Wellbeing Awards 2019, for the Community Health Development Category, and are due to be advised of the outcome by the end of June 2019.

4.17 Living Well Taking Control have had over 2,300 referrals from across Dorset with more than 1,650 people taking a place on one of their programmes. Six-month reviews have been competed in Weymouth & Portland and Bridport – retention rate is still over 80% at 6-months and the majority of participants have lost weight and had a fall in their HbA1c. Some areas had a slower start, with letters to patients known to have an eligible HbA1c going out over a longer period of time, but all areas have now had some referrals. Where a large number of patients responded to the initial letters we are still seeing continued referrals as further eligible patients are identified opportunistically, or doctors discuss the programme with patients. Most participants are over 65, which may explain why evening sessions have not been popular. The provider is working closely with LiveWell Dorset and Active Dorset, linking with the Active Ageing programme, and together there is further work to understand how to attract and retain younger people to the programme. The programme is funded nationally; the current Dorset contract runs to March 2020, and in June we will start discussion with NHSE about how the local system is involved in reprocurement beyond that.

4.18 A task and finish group has now been established to reduce smoking through better co-ordination of actions across the various healthcare providers in the system. The group, which has representatives from all the main NHS provider trusts as well as key services like LiveWell Dorset, wants to improve the offer of support for smokers regardless of what part of the NHS they are engaged with. There is acknowledgement that this will require cultural as well as organisational changes, with all staff becoming more consistent in raising the issue of smoking with patients together with the offer of timely and effective support (including the co-ordinated provision of nicotine replacement therapy and other relevant medication). Most NHS Trusts are making progress in their own right, but as patients move between various services, for example, from hospitals to community-based services and/or primary care, there is a real chance that support becomes disjointed, reducing their likelihood of quitting. The group is still at an early stage but will meet again in June to firm up plans to make a real difference.

4.19 The Active Ageing programme has seen inactive clients registering with LiveWell Dorset per quarter increased by 100% since December 2018 and inactive clients registering with LiveWell Dorset and then ‘activating’ the physical activity pathway per quarter by 100% since December 2018.

4.20 Three Picnic in the Park events have been delivered in collaboration with key partners (Stepping into Nature, Natural Choices and locality organisations) in Weymouth, Swanage and Dorchester. The events promoted being active outdoors to boost wellbeing. Across the three events over 1,500 people attended. Four more events are planned across the county in August/September 2019.

4.21 Active Ageing is working with Dorset Council on the following areas, and there are plans to replicate this work with BCP Council:

- Working with Occupational Health Team to include physical activity support/information for staff experiencing MSK or stress related sickness
• Working with learning and development team to include physical activity and wellbeing in pre-retirement programmes for staff
• Contributing to development of Dorset Council Wellbeing Strategy

4.22 There is a communications plan to promote a national Physical Activity and Long-Term Health Condition campaign in September, to both primary and secondary care services. Aim to raise awareness, debunk myths regarding exercise and long-term conditions and increase signposting to physical activity and behaviour change support services in Dorset.

4.23 Clinical Pathway system changes have been scoped across six key long-term conditions; MSK, Cancer, Cardiology, Stroke, Diabetes, Pre-Diabetes. The changes are being implemented. Also exploring possibilities to include an assessment of physical activity levels when creating a care plan for patients with a Long-Term Health Condition.

4.24 Working with One Acute Network leads to ensure opportunities to embed physical activity when developing one acute pathways for specialities, including pre-op assessments.

4.25 Working with elective care board and elective care transformation manager to explore and agree system changes to embed physical activity.

4.26 There are plans to train social prescribing link workers in ‘Encouraging Physical Activity’.

Healthy Places

4.27 Healthy Homes has delivered advice to over 1,500 clients and installed improved heating or insulation in over 300 Dorset residents’ homes since starting in 2017. Recent more in-depth work with the Adams Practice, targeting residents on the frailty register has resulted in over 50 patients receiving advice, insulation and heating improvements, increased income through identification of unclaimed benefits and fuel allowances, and referrals to other agencies including DWFRS.

4.28 The current project phase of Healthy Homes, funded by Public Health Dorset, will finish in March 2020. Options for the future of the programme, which features in the Sustainability and Transformation Plan (STP), are being considered. Funding has not yet been secured for any continuation or extension of the programme, but it is being considered for inclusion in the recommissioning of the Dorset Council Pathways to Independence workstream, with which it has a very good strategic fit.

4.29 The results of an analysis of population access to greenspace has been published: https://www.publichealthdorset.org.uk/greenspaces This provides a tool for identifying opportunities for enhancing access to greenspaces for communities who face barriers in access. The results have highlighted the importance of the public rights of way network in rural areas of Dorset for enabling contact with greenspace in areas where formal public spaces do not exist.

4.30 We are working with green space teams to identify priority projects for greenspace access enhancements in 2019/20. We are focusing on areas where accessibility analysis indicates physical accessibility is lower and enabling greenspace access offers an opportunity to support population health and wellbeing.
Appendix 1 – Prevention at Scale activities in localities

Local areas are a key setting where partners come together from local government, from local communities and neighbourhoods, and from health and care services to deliver integration and better health on the ground for local people.

There are challenges in how we work in local areas because of:
- potential changes within local government as part of Local Government Reform,
- transformation in how GP services and other health and care services work together as networks in localities,
- different geographical boundaries for different teams, and
- the balance between taking a standard approach across all localities and taking account of where different areas are in terms of development and in levels of need.

The section below brings together information from colleagues across the system to highlight the broad range of activities within each locality, with a particular emphasis on how they are responding to increasing the reach of prevention within their population, spreading good practice or responding differently where there are specific local issues, to increase the impact that we are already having. It is not an exhaustive list of prevention within localities.

Please use the links below to jump to a specific locality:
- East Dorset
- Mid Dorset
- North Dorset
- Purbeck
- West Dorset
- Weymouth and Portland

East Dorset

Dorset Council Health and Wellbeing Officer and East Dorset Locality Link worker are working to support the two local Primary Care Networks (Ferndown & Wimborne and Crane Valley) to develop a wider locality partnership as set out in the Clinical Commissioning Local Improvement Plan (CCLIP). They will be working with the networks to consult on priorities for Prevention at Scale and Chronic Health Conditions. The well-established East Dorset Health & Wellbeing Locality Group provides an excellent opportunity to support the new PCNs with development of widest possible community collaboration, which is cited by the NAPC as one of the conditions of the most successful PCNs nationally. The East Dorset Health and Wellbeing Locality Group is looking forward to welcoming and embedding the new roles of PCN Social Prescribing Link Workers to the locality in July.

The Ferndown Community Connectors pilot was launched in Ferndown last year and it has been highly commended in the mayor’s Volunteer Awards. On top of that, the connectors were also nominated for the East Dorset Town Council’s community awards in the Best Community Project, category. They are working with the Altogether Better Practice Champions at West Moors and Pennys Hill (see below) to make sure that any befriending and buddying services work to add value to each other.

Based at the new Moors Valley Golf and Activity Centre, the team have been working hard behind the scenes creating the new 2019 Activate programme for East Dorset – helping local communities get active through a wide range of entry level outdoor activities. This programme can be found at the following link: [www.moors-valley.co.uk](http://www.moors-valley.co.uk) under the Healthy Activities heading on the right-hand side. There are many opportunities for complete beginners to the more experienced, including: Walking for Health, Nordic walking, Wellness
Walking, Running (including Couch to 5k), Cycling, Park Yoga, Mindfulness in Nature, Buggy Workouts, Orienteering, Canoeing, Kayaking, Active 4 Health Lifestyle Hub and Conservation groups and more. They are also active members of the ED H&WLG sub group Physical Activity Focus group.

The local Primary Care Networks (PCNs) are identifying two projects to focus on in their first year which will support quality improvements in a long-term conditions and support prevention at scale, including considering Physical Activity Clinical Champion Training. The East Dorset Health and Wellbeing Locality Group is providing support to the new PCNs and is planning public engagement events in September of this year.

West Moors and Penny’s Hill Surgery Practice Champions have quickly established a broad range of services which support work of the practice and the community. These include (not all are provided at each surgery but services appropriate to their locality):

- Befriending and buddying services and have begun to have joint meetings with the Ferndown Connectors to make sure the two services add value to each other.
- The Legability Club (Leg Ulcer Club based on the successful Lindsay Leg Club Foundation) runs every week and has successfully attracted funding from local sources to get going. It has local volunteers who manage the social side of the club and transport to it where appropriate and staff from the West Moors Surgery provide the care.
- Transport service for patients.
- Dog walking and temporary homing for those who have to go into hospital or are unable to walk their dog for health reasons.
- Walking Group operating weekly with a Practice champion having trained as a walk leader.
- Singing Group meeting twice a month.
- Meet and greet sessions at the surgery.
- Administrative support to the surgery when appropriate.
- Digital Support Service to help people to access the surgery and prescribing through the internet.

Training has been identified for the Champions including 5 Ways to Wellbeing, Having Healthy Conversations, Safeguarding and Professional Boundaries, provided by Live Well Dorset and Bournemouth YMCA which will support the confidence and enjoyment of both the volunteers and the patients. The progression is now to support new volunteer recruitment and to ensure the Champions are established into the development of PCN’s.

East Dorset Health & Wellbeing Officer, East Dorset Public Health Link Worker and East Dorset Family Partnership Zone lead have worked together to produce an introductory session on how awareness of Adverse Childhood Experiences (ACEs) can inform our work to support prevention at scale and reducing the health and wellbeing gap. Plans are to pilot this session across the Dorset H&W Locality Groups after sign-off from CYP Emotional Health and Wellbeing Network.

The Wessex Cancer Alliance Communities Against Cancer funding programme is in place to fund community projects which support communities to improve their health and reduce their cancer risk by:

- Increasing awareness of the signs and symptoms of cancer
- Encouraging people to get cancer screening
- Encouraging people to seek help at an early stage
• Helping people to prevent cancer by living more healthily, especially in more vulnerable and isolated communities.

One bid has been made by Pramalife for Poole Bournemouth and communities of East Dorset. Outcome yet to be published.

Isolation and loneliness is a recognised issue by the communities and the GP Surgeries, who often identify people with non-medical needs. As a result of this the Practice Champions wanted to develop Befriending and Buddying services from day one. The East Dorset Locality Link Worker discussed this community need within local networks and Practice Champion meetings and the outcome of this collaborative work is that Colton Care homes have offered to let the Practice Champions link and use the facilities of their homes (including the activities) free should patients be identified by the Champions and the Practice, who would benefit from this more sheltered approach to building support networks. Links with Brookview in West Moors and Amberwood House in Ferndown has been initiated.

Dorset and Wiltshire Fire Service Safe & Well (S&W) Team are offering monthly themed drop-in sessions in East Dorset GP practices to promote their service and strengthen relationships with primary care colleagues. This is a direct result of the ED H&WLG’s task and finish group which worked on ‘Social Isolation and Loneliness’. The S&W lead for Dorset, Sarah Moore, has confirmed that a number of high-risk referrals have resulted from co-location within Westmoors Practice which would otherwise not have come to the fire service’s attention. Sarah is keen for other surgeries across Dorset to get involved – please contact her for more information sarah.moore@dwfire.org.uk

Mid Dorset

The Locality Partnership Board is well established and has a good representation of stakeholders attending. The meeting provides a useful platform for communicating, informing, networking to improve the health outcomes for people in Mid Dorset forward. For example, we have had Family Partnership Zone present providing valuable links for GP’s to support families with complex needs.

The Primary Care Network (PCN) (Watch this video link to find out more ) in Mid Dorset has been established and comprises of all 8 GP surgeries (5 town based and 3 rural). The recent PLT was used to discuss the health conditions the PCN would concentrate on over the next year, relevant to the population of Mid Dorset. The planned long-term condition being focussed on is diabetes and the prevention at scale focus is overweight and obese children, linking with the schools; this also potentially impacts on mental health.

There is an increased focus on social prescribing in the locality and the PCN have decided to use the money allocated for this and add it to the person hours they have been given from Help & Care. In addition to this there has been a discussion that the next PLT (Protected Learning Time) is used to run training on motivational interviewing and healthy conversations to boost the effectiveness of this work.

A Mid Dorset Health & Wellbeing Newsletter was requested from members at the Locality Partnership Board as a way of communicating and networking. The first copy went out in May (please contact naomi.mason@dorsetcouncil.gov.uk for a copy). It was sent out as an email format. Feedback from the first newsletter was very positive. It is planned to be quarterly.

Picnic in the Park, a Health and Wellbeing event, was held in Borough Gardens on the 18th May 2019. The aims were to raise the profile of nature-based activities and their positive
impact on physical and mental health. To bring the community together and allow families/carers/local residents to find out more about wellbeing initiatives in their local greenspace. To allow those delivering projects and activities to network and possibly initiate joint future working. It was run in partnership with Stepping into Nature, Dorset Council, Mid Dorset CCG, Dorchester Town Council, Live Well Dorset, Natural Choices and Active Dorset. The event was very successful with over 1000 people attending. LiveWell Dorset carried out 70 MOT checks and health professionals carried out several Health Checks.

A public health presentation was given to the head teachers in Mid Dorset (through DASP) to encourage networking with public health. Schools are keen to work with the GP’s to establish ways to improve the health outcomes of children particularly around obesity. Continuing to increase awareness of KOOTH, Chathealth, Daily Mile in school settings. Whole School Approach funding; 9 schools in Mid Dorset applied with 7 being successful and securing £38K between them as part of the Whole Schools Approach funding.

Continuing to connect LiveWell Dorset. Some exciting connections for running training for many of the teaching staff in Mid Dorset schools to support their health and wellbeing.

ICPCs Frailty: There are two funding streams for this work: enhanced service frailty funds and ICPSC. The enhanced service has a small uplift of funding for 19/20. No GP appointment has been made yet. ICPCs funding has been used to appoint the current staff so frailty funding will need to be used as new posts are filled. The band 3 post is to be filled shortly. The pharmacist is in post and is starting to do work. Diabetes: Appointed a band 5 dietician who’s is being trained to a band 6. Monthly MDTs with Dr Gafar are starting to take place with the H&SC co-ordinator inviting practices. WISDOM is being funded. Respiratory: First MDT held recently.

North Dorset

A new Physical Activity pathway has been created with input from Active Dorset and LiveWell Dorset. This is now in use on a 6-month trial and accessed by referring clinicians as Systmone community templates to the pathway pdf, self-populating referral form and LWD contact my patient form. A North Dorset Protected Learning Time (PLT) session was held to deliver training on the new pathway and ongoing visits are being made to partners meetings to remind them of the new process. Exercise on Referral (EOR) providers, GPs and AHPs met last week at the first of a bi-annual network event for Physical Activity information sharing and learning. LiveWell Dorset are collating data over the 6-month trial to feedback to referrers before a decision is made re pan-Dorset pathway adoption.

The carer support accreditation scheme is now moving into the implementation phase with 3 x PLTs held in May at 3 locations simultaneously to share the criteria for practices to achieve the different levels of carer support. Most practices are already working at least to bronze level but many have aspirations to achieve silver, gold or platinum status. The project steering group is supporting practices in this aim with awards planned for the end of September once progress has been verified in each location. Criteria covers helping carers access dental and health checks, have a benefits and financial check, provision of access to respite, access to other carers and social opportunities, appointing a carers lead at each practice, developing a carers practice network in North Dorset and promoting care support in an effort to find the ‘hidden’ carers who do not see themselves as being in this role.

Local health workers attended a one-off event to understand how universal credit works and to ensure active signposting. Feedback of the event was positive.
The Whitecliff and Eagle Practices’ Collaborative Practice programme continues to gather momentum with new groups set up by champions weekly and advertised on the Blandford Facebook page, most recently a diabetic cycling group. Medication delivery options are still being explored. The success of Collaborative Practice in Blandford has encouraged all the other 8 practices in North Dorset to sign up for the second tranche of the programme so North Dorset will become the first locality with every practice part of the programme.

The locality focus on frailty as part of the Population Health Management 20-week programme is ongoing and is supported by Optum. The project is nearing the end of the 20 weeks. Initial scepticism has been overcome and clinicians seem very enthusiastic about the insights they can draw from their local Primary Care data. Most of the findings support what they already knew but the stratification and segmentation of the data provides the means to identify specific population cohorts where prevention interventions should be targeted and applied.

The locality is exploring the possibility of adding 5 Ways to Wellbeing prompts to the planned North Dorset trailway information boards with Scott Norman and Rotary club funding, to raise awareness of mental health and connecting with nature and other trailway users.

North Dorset is breaking into three Primary Care Networks (PCNs) but will be retaining a locality meeting to share good practice and learning.

PPG Chairs have conducted an access to PC services audit across the locality and the plan is to use this information to support sustainable travel options.

North Dorset are showing red on childhood immunisations in some practices. A locality immunisations training event is being planned for the autumn, delivered by Public Health England, to address this.

Purbeck

The Purbeck Pledge 2019 was promoted in May and launched at the Picnic in the Park event at Durlston Country Park. The aim of the pledge was that residents would promise (pledge) to either get outdoors and give their wellbeing a boost, or ideally both. The Purbeck Pledge 2019 website is online and is part of the LiveWell Dorset service offer. Pledge trees have also been put up at Durlston, Arne and the National Trust locations. The Purbeck Pledge 2019 was promoted in tandem with Naturally Healthy Month to maximise reach with considerable social media and press communication, and a live BBC Radio Solent Interview to promote the Purbeck Pledge, Naturally Healthy Month & the Picnic in the Park events. Events listed on the Natural Choices website. The Purbeck Pledge 2019 evaluation is underway.

As part of the pledge, we worked with local nature partners to build on the work of Beat the Street and come up with fun ways for to get people out and active, with a particular focus on those who are not currently active.

The locality has liaised with the Young Researchers Forum to understand their work on emotional and mental health of young people and how they might help inspire young people in Purbeck to help co-produce ideas for encouraging young people outdoors and looking after their wellbeing.

Linked Family Partnership Zone with the National Trust to explore their offer to support targeted work with young people experiencing emotional health problems with activities such
as kayaking/surfing/survival skills etc. as well as volunteering/apprenticeship opportunities in nature.

Purbeck National Trust buildings (Discovery Centre at Studland; Visitor Centre at Corfe Castle) also offered for use by services in relation to health and wellbeing.

The locality has supported a successful bid by the RSPB Hyde’s Heath, Arne, to the Heritage Lottery Fund. RSPB Hyde’s Heath Health and Wellbeing Project Officer started in May.

**West Dorset**

The West Dorset Health and Wellbeing Locality Group has been paused as the newly established Jurassic Coast Primary Care Network (PCN) scopes the role of including emotion and mental health and wellbeing within the group.

It has been provisionally proposed and is likely that the second hour of the Jurassic Coast PCN will take on the role of hosting the Health and Wellbeing locality group aspects. This second hour includes GP and Practice Manager staff, Council representation, Public Health, and Dorset Healthcare as an initial core group. The membership and/or attendance is to be reviewed depending on the standing and changing agenda items as the PCN grows and discussions move.

Due to the above changes, the discussions on 16-18-year olds with emotional and mental health wellbeing needs, NEETS and home-schooled groups have been paused. It is still intended that smaller working groups action the following, but a timeframe or group membership has not yet been identified:

- **To explore prevention and sustainability:** (1) Working with West Dorset schools and GPs in promoting Face Forward and RONI, alongside the school engagement work by ASPIRE (2) Community transport services for young people, in the West Dorset locality (as a pilot)
- **Additional joint working:** (3) Explore revisiting promotion of signposting material, with support from the Public Health Dorset comms campaign, for services in West Dorset for young people produced by CAMHs teams to young people, GPs, schools, FPZ and other professional groups in the West Dorset locality.

The PCN have potentially identified diabetes management as a LTC priority and pre-diabetes and lifestyle education as a prevention at scale priority.

Social prescribing is a key focus and managing the relationships between the Help and Care Health Coaches and Link Workers, with the Altogether Better collaborative practice Health Champion roles is important to West Dorset. The priority is making referral and coordination between the two services as smooth as possible for both professionals and the general population.

Bridport Medical Centre, Lyme Bay Medical Practice, Lyme Regis Medical Centre and Barton House (Beaminster) are now all engaged with Altogether Better. Maiden Newton is also keen learn from the Altogether Better model in the future.

**Weymouth and Portland**

Working with the GP Locality Partnership Board as it develops as a Primary Care Network (PCN).
There is a GP locality focus on Chronic Obstructive Pulmonary Disease (COPD) as part of the Population Health Management programme.

The GP locality are also looking at improving performance and effectiveness of Learning Disabilities Health Checks.

Following the Safe Sleep project, which provided a bed for the homeless in the winter months, the GPs are looking at how they can support joint working around those who are homeless.

Wyke Regis Surgery have become a collaborative practice and have recruited 15 practice champion volunteers supporting the practice.

The Health Visiting Carbon Monoxide 3-month pilot to support smoking cessation connected with Better Births has completed. Initial results from the pilot are showing positive signs with 69% of those who gave up smoking in pregnancy staying quit.

The locality is developing a joined-up approach around school absence lead by the Family Partnership Zone but linking with GP’s for a cohort of pupils in a pilot project. The pilot will commence in September for the Autumn term.

The locality is developing a resource of local services/groups and opportunities to support mental for adults and children and is also supporting the Weymouth College peer mentoring programme.