

BATH AND NORTH EAST SOMERSET

CHILDREN, ADULTS, HEALTH AND WELLBEING POLICY DEVELOPMENT AND SCRUTINY PANEL

Monday, 15th January, 2024

Present:- Councillors Dine Romero (Chair), Liz Hardman (Vice-Chair), Alex Beaumont, Paul Crossley, Dave Harding, Michelle O'Doherty and Joanna Wright and Robin Moss

Co-opted Members (non-voting): Chris Batten and Kevin Burnett

Also in attendance: Suzanne Westhead (Director of Adult Social Care), Rebecca Reynolds (Director of Public Health & Prevention), Mary Kearney-Knowles (Director of Children and Education), Christopher Wilford (Director of Education), Laura Ambler (Director of Place, B&NES, BSW ICB), Victoria Stanley (Programme Lead, BSW Community Pharmacy, Optometry and Dentistry), Helen Hoynes (School Organisation Manager) and Graham Sabourn (Head of Housing)

Cabinet Member for Adult Services: Councillor Alison Born

Cabinet Member for Children's Services: Councillor Paul May

69 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

70 EMERGENCY EVACUATION PROCEDURE

The Chair drew attention to the emergency evacuation procedure.

71 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

Councillor Lesley Mansell had sent her apologies to the Panel. Councillor Robin Moss was present as her substitute for the duration of the meeting.

72 DECLARATIONS OF INTEREST

There were none.

73 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIRMAN

There was none.

74 ITEMS FROM THE PUBLIC OR COUNCILLORS - TO RECEIVE STATEMENTS, PETITIONS OR QUESTIONS RELATING TO THE BUSINESS OF THIS MEETING

Councillor Eleanor Jackson addressed the Panel, a summary of her statement is set out below.

She informed them that Youth Connect South West were seeking an increase in their grant from Westfield Parish Council to provide services for the Westfield Youth Club. She added that she was also seeking to escalate a matter with Property Services on their behalf to enable them to establish a lease agreement for the Youth Centre in Radstock that they use.

She explained that a previous Liberal Democrat administration in 2014 had promised to carry out renovations on the premises and that she now wanted to attempt to progress this issue.

She said that she felt there was also a B&NES wide problem of parents parking their vehicles too near to schools and across the driveways of local residents. She said that she would welcome any plans for local walking to school programmes.

She stated that she was also concerned about the incoming parking charges within Radstock and the Somer Valley.

The Chair asked for the Cabinet Member for Children's Services to respond to the matter relating to Property Services.

Councillor Robin Moss commented that the Corporate Scrutiny Panel were assessing the Council's Commercial Estate and getting value for money from their premises, including support for use by the not-for-profit sector.

Councillor Liz Hardman asked how much local businesses will be affected by the new parking charges in Radstock & Midsomer Norton.

Councillor Jackson replied that she had been told that it was likely to have an adverse impact on a number of them and the Susan Hill School of Dance in particular.

The Chair suggested discussing the issue of walking routes to school with Councillor Jess David as she was aware that she had worked on a similar matter with Widcombe School.

Jeremy Palmer addressed the Panel and made a statement in support of Burlington Street Supported Housing and Detox. A copy of the statement will be appended to these minutes as an online appendix, a summary is set out below.

Before I found DHI, I spent a lifetime battling addiction to class-A drugs, struggling with alcohol problems, in and out of prison, and by the time I was released, I was homeless as well.

In 2012, I decided enough was enough. I was bailed on license after a three-year prison sentence, and I wanted to get clean. As part of my bail and license conditions, I had to engage with DHI's criminal justice team, and the sessions I had there really turned my life around.

DHI helped me become more independent. After completing my detox, I moved into Barton Buildings, which DHI also ran. They provided drop-in visits to make sure I was doing well but gave me the freedom to ensure I was prepared for an

independent future. I took cooking classes, started the HAP – or Home Achievement Programme – which significantly contributed to my long-term recovery and became ready to re-enter society as a new, better man and a productive member of society. All of that was possible because of what DHI did for me.

DHI gave me my life back. And when I was ready, I wanted to give back a little bit back to them, so became a Peer mentor to help other people who might be in a similar situation to myself. This was very rewarding because others could see the change in me.

Now, I live in my own home, have full custody of my two beautiful children and have done for over nine years, and have been employed by DHI within the Reach Service for the last decade! I regularly support others facing issues with drugs, alcohol, and homelessness and know the value of the support... not just for me, but for my children.

Councillor Joanna Wright asked what the impact would be to DHI if the proposed cuts within the budget were made.

Jeremy Palmer replied that believed that they would have negative impact to what services could be provided, especially in terms of housing. He added that this would likely lead to additional homelessness, crime and drug & alcohol abuse that would cost the Council more in the long run.

Councillor Liz Hardman asked if they knew the total amount of cuts being proposed directly to them.

Rosie Phillips, CEO of DHI replied that within the proposed 21% cut from the VCSE (Voluntary, Community or Social Enterprise), a disproportionate amount of that is proposed to come out of housing and housing related support services (34%) and that this would have a massive impact on their work.

Councillor Robin Moss commented that to obtain certain levels of grant funding there has previously needed to be an agreed amount of matched funding and so these organisations do need to know the true extent of these proposals.

Rosie Phillips replied that this was the case and that they need some assurances to be in place.

Alison Millar addressed the Panel and made a statement on behalf of DHI and Reach. A copy of the statement will be appended to these minutes as an online appendix, a summary is set out below.

Zahra (not her real name) and her family were at significant risk of becoming homeless when she was referred to Reach. Reach is the DHI service which provides practical and emotional support to help people live independently and develop useful life skills. Zahra's landlord wanted to take back their home to sell, issuing a Section 21 no fault eviction notice.

REACH advisors were able to quickly assess the situation, promptly setting Zahra up on BANES' Homesearch site, where she was awarded a B Banding. The banding did

not reflect the urgency and severity of Zahra's family situation and the REACH team advocated an A banding due to the close eviction date.

With the assistance of the team, Zahra was able to secure a new home before being evicted. With a high degree of legal housing knowledge and expertise, the team also applied successfully to court for an extension at her existing property while some essential repairs were made to her new accommodation.

Reach's support meant that the family were able to avoid having to move to temporary accommodation. This resulted in a significant financial saving to the council and minimised disruption to family life including schooling. The cost of temporary accommodation ranges from approximately £600 per week in Dartmouth Avenue (the local authority temporary accommodation) to approximately £1200 a week for a hotel if Dartmouth Avenue was full, which it generally is.

None of this begins to touch on the long term costs which would have been incurred by society had the family been evicted. The REACH teams actions – in this and in an average of 900 cases a year - contribute to prevention of many longer-term issues, avoiding massive cost to both the individuals and to the local authority.

The UK has an unprecedented national housing emergency. Developing Health and Independence's REACH Service is working hard to address this so that nobody must face homelessness. It has itself restructured and remodelled using charitable funding over the past few years in order to be as efficient as possible.

It would be very difficult for the council to apply for additional funding, for example for clients in rent arrears or needing resettlement packages or to develop services from the range of charitable trusts available to DHI, since many that fund DHI, Reach or its clients, do not allow statutory services to apply for funds.

Councillor Joanna Wright asked what percentage of their budget is given to DHI from the Council.

The Head of Housing replied that the Council in previous years had given £400,000 for the Reach project, that it is around 10%.

Councillor Robin Moss asked if there were any benchmark figures for the amounts given to similar organisations from other Local Authorities.

The Head of Housing replied that they do not have such figures in place. He added that the use of temporary accommodation within B&NES was low and that this was normally a good indicator.

Councillor Robin Moss commented that a potential under application for Lottery funding, £1m in 10 years, might also reflect on the grant potential.

Councillor Wright asked for the benchmarking figures mentioned to be supplied to a future Panel meeting.

Kate Morton, CEO, Bath Mind added that as an organisation they were also looking at similar work as their contracts had not been given any uplift over the previous number of years.

Rosie Phillips, CEO of Developing Health & Independence (DHI) addressed the Panel. A copy of the statement will be appended to these minutes as an online appendix, a summary is set out below.

We recognise and understand the difficult position the Council find itself in and DHI are committed to work with council colleagues to manage and mitigate the impact of cuts. Indeed, we have been remodelling services for years to ensure we can manage in the financial climate we have been faced with since Covid.

The VCSE on the face of it appears to be bearing a disproportionate amount of the cuts. I understand, in part, this is due to the Council discharging its statutory duties – however, the VCSE brings much added value, and plays a major role in preventing people from needing costly statutory provision.

Having worked for over the 30 years to promote social inclusion among vulnerable and marginalised groups, I know that a safe place to live is a prerequisite to achieving effective outcomes for those with a drug or alcohol problem, those suffering from mental ill health, fleeing domestic violence, for ex-offenders, not to mention hard working families on low incomes and their children. It is an essential foundation for any other intervention to succeed.

Children brought up in temporary accommodation are much more likely to experience all kind of negative outcomes and we know the trauma brings lifelong effects. They are more likely to be excluded from school, be a victim of knife crime, use drugs problematically, be exposed to exploitation by adults, and inducted into a criminal lifestyle...thus perpetuating the cycle.

I urge the Council to delay the cut, giving time for recommissioning and a sensible planned approach to managing reduced resources. In difficult times such as these I can see the temptation for the Council to focus on supply rather than demand.. However, prevention is not a luxury, you can afford to do without for 12 months. It is the rational approach to managing demand so statutory services can cope.

However, if a delay and recommissioning is really not an option, I urge the Council to rethink the current proposal that puts the biggest burden on housing and housing related support, to find a better balance, and to prioritise services that prevent more families and individuals falling into homelessness.

Councillor Paul Crossley commented that he was aware of other Councils, including Cardiff, that were putting in place modular units to tackle their housing needs. He asked if B&NES had considered such an approach.

Roanne Wooten, Julian House replied that they have approached officers from the Council regarding this and have been told that there is no land available. She added that they were awaiting a decision from the Government for a bid to fund a site within a car park in Somerset.

Councillor Crossley asked if they had been able to identify any potential land / sites themselves.

Roanne Wooten replied that they had approached a landlord about a specific piece of land, but unfortunately, he pulled out at a late stage in the process.

Councillor Crossley asked if they were looking at potential sites across B&NES.

Roanne Wooten replied that they were as people were now not expecting to stay in central locations as long as an access to services remains in place.

Councillor Crossley asked how they were going to be able to use the car park site within Somerset.

Roanne Wooten replied that the car park itself was quite underused and was next to a community hall which had access to local shops and services. She added that she had heard good feedback from modular units being used in Cornwall and Oxford.

Councillor Wright asked given the health implications of the potential cuts, how much has the Public Health team been involved in this process.

The Director of Public Health & Prevention replied that the team had worked closely with other departments in the preparation of the budget reports.

The Chair, on behalf of the Panel, thanked all concerned for their statements and for submitting their questions prior to the meeting. She explained that the questions and answers document had been circulated and would be taken into account as part of the discussion relating to the Draft Budget.

75 DEVELOPMENT OF DRAFT BUDGET 2024/25 - PROPOSALS WITHIN PUBLIC CONSULTATION (RELEVANT TO THE PANEL REMIT)

Councillor Paul May, Cabinet Member for Children's Services introduced this report to the Panel. He said that he had listened carefully to the statements that had been made and that the Council does value the work carried out by the 3rd sector.

He explained that the timing of any changes would be key and that the public consultation on these proposals closes today prior to further discussion at meetings of the Cabinet (8th February) and Council (20th February).

He stated that B&NES had, in his view, been given a poor local government settlement and that the Council is still required to provide a balanced budget.

He said that significant growth was planned across the services; £5.6m within Children's Services and £2.3m within Adult Social Care.

He added that there is a proposal to use £200,000 from the ring-fenced Public Health Grant across other services providing Public Health activities.

He stated that £9.4m of Capital Schemes are being proposed across both Children and Adult Services with £4m outlined for a SEND Residential School and £5m service supported borrowing for further Supported Living for Adults.

Councillor Alison Born, Cabinet Member for Adult Services addressed the Panel. She said that she believed that the Council has a good track record for enabling savings to be made.

She stated that demand for services across the Council has increased substantially, particularly within Home to School Transport.

She explained that they had not yet had confirmation of the Public Health Grant, but that in previous years this had been around £10m.

She said that the proposed reduction in non-statutory spend was likely to impact our local 3rd sector partners and the area of housing support the most. She added that the Council values the work of the 3rd sector immensely and that it will listen and engage with those that are likely to be affected.

The Director of Children & Education addressed the Panel. She echoed the comments made by the Cabinet Members about a significant increase in demand for their services.

She explained that there has been a 30% increase in children and young people that have SEND and this has required a proposal for additional staff at a cost of £90,000.

She stated that continued pressure is being seen in the area of Home to School Transport and that due to increased demand in routes, inflation costs and a lack of suppliers they are seeking a further £1.76m within the budget.

She said that contractual inflation from our residential and specialist providers has resulted in a proposal for a further £941,000 in this regard.

She said that an increase in demand across Children in Care, Child Protection, Looked After Children, Unaccompanied Asylum-Seeking Children and other service users has led to a proposal for an additional £2.786m.

She stated that the overall total growth within Children's Services was expected to be £6.879m.

The Director of Adult Services addressed the Panel. She explained that the savings required across the service were £2.1m, which includes the £802,000 for Community Support Services. She stated that they value the work of the 3rd sector greatly and continue to support housing grants unlike many other Local Authorities.

She explained that it has been a hard-fought budget to develop this year considering that the services provided by HCRG are coming back in house in April 2024.

She said that the savings were anticipated to be achieved by the way services are commissioned through changes to our commissioning structure, how packages of care are allocated and the funding of the Community Resource Centres.

The Director of Public Health & Prevention addressed the Panel. She explained that the Public Health Grant has normally increased slightly each year and that as previously mentioned it was anticipated to be around £10m for this coming year.

She stated that the grant would be used to facilitate a number of work areas, including Sexual Health Services, Health Visiting, School Nursing, Drug & Alcohol awareness, Stop Smoking Services, Healthy Weight Services and NHS Health Checks.

She said that as with other departments there was a growing demand for services and they will seek to continue the good work they have in place with the local providers.

She explained that the detail of the proposed movement of £200,000 from the grant by reducing health improvement project work and preventative measures had yet to be agreed.

She concluded by informing the Panel that a proposal to procure leisure services at Royal Victoria Park has been submitted, which if successful could benefit the Council by £10,000.

Councillor Robin Moss commented that this was not an easy budget to discuss in the context of the possibility of 1 in 5 councils now at risk of going bankrupt. He said that he disagreed with the comment that the Council has a good track record of delivering its budget as he was aware of big overspends that were currently in place.

He criticised the report for its lack of detail on the proposed savings and said that squeezing these budgets would only lead to further problems down the road.

He questioned whether capital could be used to spend to save over the next 4 - 5 years to assess potential impact.

He suggested that rather than a 21% cut being made, this was an opportunity to rebase the budgets and increase investment to the 3rd sector.

He questioned whether it was appropriate to propose moving £200,000 from the ring-fenced Public Health Grant and asked would this jeopardise the Council receiving the grant.

The Director of Public Health & Prevention replied that she was confident that this proposal would be acceptable and said that consultation on the decision was still ongoing.

The Director of Children & Education said that in year savings have been achieved in the past two years by completing successful transformation programmes within Children's Services. She added that detailed Equalities Impact Assessments have been carried in connection with the proposed £1.26m savings.

She added that a saving of £500,000 was being proposed through a commissioning review and their packages of support.

She explained that they were looking to increase the provision of in-house Foster Carers and Supported Lodgings Providers locally to reduce the need for residential placements.

She said that the £300,000 saving with regard to non-statutory services was only a proposal at this stage and that the detail would need to be worked through with our 3rd sector providers.

Councillor Moss asked that any additional information on the budget proposals be shared with Councillors ahead of the Corporate Scrutiny Panel on 23rd January.

Kevin Burnett said that all were aware of how difficult a time this is for councils currently, but suggested that prevention work should be retained as much as possible as he believed this would save more in the long term.

He asked if any of the proposed cuts were new or a continuation of a plan already in place.

He asked if the involvement of the ICB has been fully explored in terms of the proposals that have been made in the budget.

He asked what more could be done to alleviate the rising costs associated with Home to School Transport.

The Director of Adult Services replied that they have worked closely with the ICB on these savings plans and how they might be implemented if approved. She added that the proposed savings regarding Community Resource Centres were new and that the detail and the outcomes of the consultation will be shared with the Panel and Cabinet next month.

She added that the review of care packages was an ongoing piece of work and that the review of the commissioning structure was a new proposal being considered.

Councillor Paul May said that they are in discussion with the Cabinet Member for Resources and those organisations within the 3rd sector so that a review of services can be effectively carried out.

Councillor Alison Born explained that discussions were also ongoing as to whether any savings targets could be achieved over a longer period of time. She added that they want to limit the suffering as much as possible and do understand the consequences of their proposals.

Councillor Joanna Wright said that she understands that the Council needs to produce a balanced budget, but there was not enough detail within the papers to allow the Panel to have a proper discussion.

She thanked the 3rd sector organisations for highlighting the areas of concern and said that in future the Panel should be allowed to send the report back if they deemed it not adequate enough.

The Director of Adult Services replied that the same report had been issued to all three Policy Development & Scrutiny Panels and that they would take the comments made on board to see if there was a different way for the information to be supplied in future years.

Councillor Liz Hardman said that she agreed with the comments already made that this was a difficult report to analyse because of the small amount of detail within it. She stated that she was concerned about the proposal to remove £802,000 from the Community Support Contracts.

She asked if the proposed new SEND Free School would allow any savings to be made from children and young people not having to travel so far for their placements.

She said that she hoped the review of Home to School Transport would lead to some savings being achieved and suggested that the Cabinet Member and officers look at how this is carried out across WECA, the use of Dial-a-Ride vehicles and taxis.

The Director of Children & Education replied that she shares the cost concerns and said that a huge amount of work had been carried out on this matter over the past two years. She said that they have considered whether they have their own fleet of vehicles and how routes are organised in great detail.

She added that the main source of costs is linked to our children and young people with SEND who need to travel within B&NES and outside of it to access their daily provision. She said that they have been successful in gaining £4m in capital funding for a new residential provision which will hopefully be in place in 2 – 3 years' time and at that point they would be looking for a reduction in this budget area.

The Director of Adult Services said that a strategic review of Community Services was due to take place next year and that they would work with the 3rd sector to deliver the best service possible.

Kate Morton, CEO Bath Mind asked if the no inflation to 3rd sector contracts for the past seven years had been taken into account as part of this process and called for an assurance that the organisations involved in this work would be a part of the discussions to attempt to provide appropriate solutions.

The Director of Adult Services replied that she was aware of that issue and that a strategic approach will be needed from all parties to form future plans.

The Head of Housing said that officers are aware of how much these potential decisions will affect the organisations involved and that when a decision has been made on the budget they will engage further as to how the savings can best be made.

Councillor Paul Crossley asked how confident they were in being able to keep the pay inflation estimate at 5% when it is currently tracking at an average of 6.4%.

The Director of Children & Education replied that it had been kept at 3% over the past year and so it was hoped that this increase would be achievable.

The Director of Adult Services added that in terms of Domiciliary Care the Council were seen as good payers and that 5% was a level that would doable.

Councillor Crossley referred to Annex 3 and the proposed £20m to be spent over the next five years on supported housing and temporary accommodation and asked how many homes could be expected from this initiative and what type of units would they be.

The Director of Adult Services replied that in terms of Adult Services this was an exciting proposal as they would be able to assist more working age adults with disabilities to be able to live in supported accommodation with 24-hour support. She added that two projects were nearing completion that would see 22 extra units becoming available.

She added that they would also be looking to provide accommodation to those young people who are coming out of care to be able to let them remain in the local area.

Councillor Alison Born added that this has been a priority of the service to reduce out of area placements, enable people to live in their known localities and to make savings into the future.

Councillor Robin Moss reiterated his point about receiving more detail in these reports and the fact that the Labour Group have not been able to support the last four Liberal Democrat budgets because of that lack of detail.

He said that he appreciated that officers were doing their utmost to protect the most vulnerable within B&NES.

He stated that a large number of Local Governments are in crisis and that Health and Social Care had been neglected by central Government for at least a decade.

Councillor Paul May said that he felt the Council worked well across all of its services and with its partners and will engage further with them as requested once a decision on the budget has been made. He stated that it has been a difficult budget to set.

Jack Bailey, Curo called for openness and transparency to be maintained through this process and said that the passion was evident from all organisations on the need to find workable solutions.

Kevin Burnett referred to the Safety Valve programme and asked if any leverage can be gained from the LGA or other bodies to support a longer-term view on the impact on these savings proposals just to provide a balanced budget.

Councillor May replied that there is an intention to provide the Panel with a future report giving more detail of the Safety Valve programme. He added that there was potential for up to £19m of incoming funding, but that this would need to be used within specific timescales.

Councillor Wright asked if investment in the capital programme was sufficient to enable the Council to deliver services in a better way in the future.

The Director of Children & Education replied that the funding associated with a potential new Special School could lead to a reduction in spend in future years.

Councillor Alison Born added that the proposals relating to the Community Resource Centres would see those facilities being used in the best way possible.

Councillor Dave Harding asked if there were plans to use Council reserves as part of this budget setting process.

Councillor Alison Born replied that there were ongoing discussions relating to the budget and any potential use of reserves. She added that there was a need to have the right levels in place to protect the Council into the future.

The Chair summarised the discussion and began by noting that all were concerned at the level of detail that had been provided and the potential consequences of the savings proposals.

She stated that there was a real concern that cuts to preventative services will cost the Council more in the longer-term.

She said that savings within these services was the wrong place for the burden to fall for Local Authorities and that it should be addressed appropriately at a national level.

The Panel **RESOLVED** to recommend to the Cabinet that these proposed savings are delayed, as far as possible, until a better understanding can be provided.

76 MINUTES: 11TH DECEMBER 2023

Councillor Dave Harding referred to questions raised at previous meetings that he had not yet received a response to.

He asked about the Holiday Activity Programme that was held at the Chew Valley Rugby Club and asked how many young people had attended it.

He subsequently asked if any children had to pay to attend these sessions and if so, how many and what were the overall numbers of children who attended the Holiday Activity Programme sessions across the Council?

He had also asked if any information was available as to the gap in time between a young person beginning to provide care and them being formally identified as a Young Carer.

Councillor Liz Hardman asked if any response could be given to her question relating to the £90m savings required from the ICB and if the bank rate would be affected.

Laura Ambler, Director of Place, B&NES, BSW ICB replied that as mentioned previously this was a historical figure and there is an intention to bring a further report to the Panel regarding this and any implications. She added that colleagues

within HR were assessing whether a standardised bank rate would be possible as this would have to be balanced with maintaining services.

Alex Beaumont informed the Panel that he had himself established the location of the Community Pharmacy in Keynsham and asked that more work be done to advertise this and other locations.

The Panel, with these comments in mind, confirmed the minutes of the previous meeting as a true record and they were duly signed by the Chair.

77 CABINET MEMBER UPDATE

Councillor Paul May, Cabinet Member for Children's Services addressed the Panel, a summary of his update is set out below and will be attached as an online appendix to these minutes.

Home-to-School Transport

Education and Transport teams are drafting a new HTST policy. This policy is in response to the Department for Education's consultation on changes to the statutory Home to School Transport guidance issued by the DFE in 2014. In July this year, the DFE concluded this consultation and issued updated guidance for all local authorities. All LAs are expected to update their HTST policies per this guidance by September 2024.

As part of the development of the policy, we will go through a consultation process with parents and carers and our solicitors to examine our policy to ensure we comply with the new DFE guidance. I plan to ask officers to bring the draft policy to scrutiny in May 2024. We aim to implement the new policy in time for the new academic year in September 2024.

Corporate Parenting

A Corporate Parenting meeting is scheduled for Wednesday, the 17th of January. I reported to the last full Council that I am seeking protected status for care leavers (care experienced). At this meeting, I will discuss the reasons behind this recommendation and the need for a Council joint motion to promote and adopt this status. I have also spoken to Curo, seeking their similar support, though, of course, we will need the Council to adopt the proposal first.

Faulty concrete in schools (RACC)

So far, no RAAC has been identified in B&NES schools. However, the DFE have commissioned and instructed LAs and Trusts to conduct more intrusive RAAC examinations of school buildings. When findings of these reports become available, we will report anything that detrimentally affects education provision in B&NES.

DFE Safety Valve scheme

In previous Panel reports, you will have read about the DFE's Safety Valve programme and the work officers are doing to improve our placements and services

for children with SEND. Whilst this programme has challenging expectations from the DFE, there are many positive developments that the programme will deliver. I will ask officers to bring a full report to scrutiny to bring a spotlight on this work.

Councillor Alex Beaumont asked if there was a timescale for the RACC examinations to be completed.

Councillor May replied that he would inform the Panel as soon as any new information had been obtained.

Councillor Joanna Wright asked why the decision was taken to stop accepting Unaccompanied Asylum-Seeking Children (UASC) within B&NES.

Councillor May replied that the costs and performance of the service were being adversely affected. He added that during recent budget discussions it had become apparent that not all Councils within the South West were accepting their share of these young people.

The Director of Children & Education added that no formal request had been made to stop receiving referrals of UASC. She said that the Chief Executive had asked the Home Office for referrals to be paused until the end of March 2024 as B&NES had exceeded its quota whereas other Local Authorities had not.

She said that a briefing could be circulated to the Panel to provide further information.

Councillor Wright referred to the Scholar Scheme which enables A-Level students to access reduced train fares and called for support to make this more publicly aware. She said that a referral was required from a school or education establishment to Great Western Railway so that these price reductions can be obtained.

She questioned whether a review of the city centre security bollards was required as they failed to work properly to allow emergency vehicle access on one occasion recently. She added that if a review was required how much would it cost and what are the health implications if the bollards continue to fail.

The Chair replied that a response was likely to be required from the relevant Cabinet Member.

Councillor Liz Hardman asked if the new Home to School Transport policy would see a reduction in this budget area.

Councillor May replied that a summary of the DfE guidance was available that he was happy to share with the Panel. He said that with particular regard to young people with SEND, that the service was likely to need to increase and that having asked the question, no additional funding was planned to be received.

Kevin Burnett asked if the Council was involved in co-ordinating the RAAC surveys for schools.

The Director of Children & Education replied that they were not, it was for the schools to handle the matter directly.

Kevin Burnett asked if the Music Service for schools within B&NES was now safe and had the agreement between them, South Gloucestershire and North Somerset been approved.

The Director of Children & Education said that she was pleased to say that the agreement had been confirmed on 12th January 2024.

Kevin Burnett asked if the proposed role of a Designated Social Care Officer was within the current growth plans.

The Director of Children & Education replied that it was and that they were looking at how the role can be taken forward across Education and Social Care.

The Chair thanked the Cabinet Member on behalf of the Panel for his update.

78 B&NES, SWINDON & WILTSHIRE INTEGRATED CARE BOARD (BSW ICB) UPDATE

A copy of the update will be attached as an online appendix to these minutes.

Councillor Liz Hardman said that she was pleased to read about the launch of the Paediatric Urgent Service Hub (PUSH) which will run until the end of March 2024, but asked how widely this had been publicised.

She also referred to the Women's Health Hubs and asked how many would be within B&NES, where they were to be located and when would they be open.

Laura Ambler, Director of Place, B&NES, BSW ICB replied that the PUSH clinics have so far been very successful with over 200 children having been seen within them. She added that a significant campaign to advertise them had taken place and that they were willing to see what more could be done.

She stated that along with all other ICBs across England, BSW ICB has received over £600,000 in funding until 2025 to expand or establish a Women's Health Hub that focuses on delivering more intermediate care in the community and that plans regarding this were at a relatively early stage.

She added that the Women's Health Hub will be developed by partners across BSW including the NHS, public health teams, the Voluntary, Community and Social Enterprise (VCSE) sector and engagement with local people. She said that they will bring further information to the Panel when it is available.

Councillor Joanna Wright commented that an issue had been raised with her about women receiving health visitor support after giving birth. She asked if all mothers should expect to have this support offered to them whether it be their first child or a subsequent child.

The Director of Public Health & Prevention replied that she felt sure that all women would be offered the service of a health visitor regardless of it was their first child or not.

The text below has been supplied following the closure of the meeting.

- *In terms of service offer, all subsequent babies / children are offered the same visits and support from the Health Visiting service as their first baby/child.*
- *Although families may be more confident in parenting subsequent children, each child is unique and will have their own needs which could require greater support from the service.*
- *The parents/carers may choose to not access / decline reviews, but the service is always offered.*

If a parent/carer has a question or is unhappy about the contact they receive from their Health Visitor, we'd encourage them to email into HCRG.bathnesspa@nhs.net so that the HV professional lead can register the issue as a concern if appropriate, and then investigate and speak to the family involved and offer further support as needed.

Kevin Burnett asked if further information was available on the Hospital Improvement Programme (HIP).

Laura Ambler replied there was none at this present time, but would update the Panel when any does become available.

Kevin Burnett asked if it could be explained what was meant by the term in the report 'restoring access to dental care for the population'.

Victoria Stanley, Programme Lead, BSW replied that she could address that point within the report when discussed in the next agenda item.

The Chair thanked Laura Ambler on behalf of the Panel for the update report.

79 DENTAL SERVICES PROVISION

Victoria Stanley, Programme Lead, BSW Community Pharmacy, Optometry and Dentistry introduced this item to the Panel. She began by referring to the point raised previously by Councillor Harding regarding dental extractions and said that she had made a request to be supplied that information and would share that with the Panel when it has been received.

She added that the advertising of the Community Pharmacies will be taking place and that a decision was taken not to do this over the Christmas / New Year period to avoid any potential uncertainty.

Councillor Liz Hardman asked what could be done in terms of the current capacity being insufficient to meet demand as only 60% of children and 33% of adults had seen a dentist within the last 12 months.

She added that she believed that issues relating to dental care were responsible for a substantial increase in hospital admissions for children.

Victoria Stanley replied that 39 dental contracts are commissioned across B&NES accounting for 213,032 Units of Dental Activity (UDA). She added that they were looking at plans to be able to utilise the flexible commissioning guidance and provide a service to those most in need; children, vulnerable people and looked after children.

She said that a conversation with one particular B&NES provider was due to take place very soon.

Kevin Burnett asked for an explanation for what the public can expect with regard to having access to dental care.

Victoria Stanley replied that the NHS measures access in terms of patient contacts and the utilisation of Units of Dental Activity. She added that each band of treatment equals a particular UDA. She said that they are working to try to increase the ability for the public to be able to access an NHS dentist and stated that as part of their current contracts they should be publicising when any such places do become available.

Kevin Burnett asked if the dental underspend mentioned within the report could be used to address these issues.

Victoria Stanley replied that this would be used to develop the flexible commissioning plans.

Kevin Burnett referred to page 33 of the agenda and asked if the complaints shown were to be expected and how are they addressed.

Victoria Stanley replied that this element had only transferred to the ICB in July 2023 and they did not have access to the previous data. She added that access to an NHS dentist was the main are of concern and that they were working alongside HealthWatch colleagues to gain an understanding of the feedback that is being given.

Councillor Joanna Wright asked what is meant by 'All proper and necessary dental care and treatment' within mandatory services and how can it be accessed if not in receipt of regular dental care.

Victoria Stanley replied that a dental triage service is available through calling 111.

Councillor Wright asked how many adults within B&NES had not received any recent dental care or were not registered with a dentist.

Victoria Stanley replied that only 33% of adults saw an NHS dentist in the last 24 months and that technically nobody is registered with a dentist, a patient is in receipt of regular dental care.

She added that they were looking at the issue of oral health care needs with Public Health colleagues across B&NES, Swindon & Wiltshire and that a toothbrushing programme was due to commence for children.

Councillor Wright commented that the debt of a newly qualified dentist was substantial and therefore to operate as an NHS dentist was not profitable to them.

Victoria Stanley replied that the UDA price had been set in 2006 and that they were unable to move away from this at this point in time.

The Chair asked for reporting on this matter to continue through the regular updates from the ICB.

The Director of Public Health & Prevention offered to work with the ICB on a future report to the Panel.

The Chair thanked Victoria Stanley on behalf of the Panel for her report.

80 SCHOOLS ORGANISATIONAL PLAN

Councillor Paul May, Cabinet Member for Children's Services introduced the report to the Panel. He said that demand for places within Secondary and Primary education had reduced, but that there has been an increase identified within provision for children and young people with SEND.

The School Organisation Manager added that birth figures had currently levelled off within B&NES, but the need for additional SEND provision has increased.

Councillor Paul Crossley said that he was concerned over the lack of use of the former Culverhay site and believed that young people within its locality have a poor deal in terms of accessing educational provision close to their homes. He stated that potential educational land should not be sold unnecessarily.

Councillor May replied that a meeting had been held recently to discuss the site in terms of education and other purposes and what could be achieved if additional housing was put in place as part of the Local Plan.

The Director of Education added that they were looking to maintain some form of education provision from the site, but that additional Secondary and Primary places are not needed at this time.

He added that more vocational offers would be welcome within Bath for those pupils in Year 10 & 11 and that they are providing support to Bath College to attempt to find somewhere to achieve this.

Kevin Burnett asked if Academies or Multi Academy Trusts (MATs) were able to apply for additional buildings to be built or to increase their Planned Admission Number (PAN).

The School Organisation Manager replied that they are able to apply for funding to expand, but that this was rare at the current time. She added that they do work

closely with all MATs and felt that they would share any such intentions with the Council.

Kevin Burnett asked if it was felt that sufficient provision would be in place if the additional SEND Free School, Alternative Provision and any initiatives through the Safety Valve programme come to fruition.

The Director of Education replied that he believed that a good level of sufficiency would be in place if all of those elements work out as planned.

Councillor Liz Hardman asked if the 203 children & young people with SEND that are placed out of county for their provision would be invited back into B&NES if new facilities were established.

The Director of Education replied that this would be the case for a number of them, but for others they would still need to access services out of area that could not be provided by us. He added it was possible that around 120 of these young people could be invited back for provision within B&NES and this could lead to cost savings.

Councillor Hardman referred to Paulton Infant School and its PAN of 90 and asked if pupil numbers were reducing in that area.

The School Organisation Manager replied that this was a bit of a challenge as numbers have decreased to an average of around the low 60s or high 50s, but that a degree of flexibility was required otherwise you would be at risk of removing a whole class from the PAN. She added that we also need to keep in mind whether children can travel to their local school sustainably.

Councillor May asked what would happen if new housing developments were approved through the Local Plan in the south-west of Bath.

The School Organisation Manager replied that they do work with colleagues in planning policy and that normally there is some early engagement and discussion relating to existing provision when new developments are being considered. She added that it would also depend on the type of housing that was being proposed and when it was planned to be built.

The Panel **RESOLVED** to note the proposed strategy for the provision of sufficient mainstream and SEND school places within the 2023 – 2029 Plan period.

81 PANEL WORKPLAN

The Chair introduced this item to the Panel. She said that through the course of the meeting they had identified the following items that could be considered to be added to their workplan.

- Further dentistry update
- Home to School Transport
- Safety Valve programme
- Covid – Deaths from hospital admissions
- Modern Day Slavery

The meeting ended at 1.19 pm

Chair(person)

Date Confirmed and Signed

Prepared by Democratic Services

Jeremy Palmer – Statement in support of Burlington Street Supported Housing and Detox

Before I found DHI, I spent a lifetime battling addiction to class-A drugs, struggling with alcohol problems, in and out of prison, and by the time I was released, I was homeless as well.

In 2012, I decided enough was enough. I was bailed on license after a three-year prison sentence, and I wanted to get clean. As part of my bail and license conditions, I had to engage with DHI's criminal justice team, and the sessions I had there really turned my life around.

DHI was the opening of a door to a whole new life. My children were in temporary foster care with my sister at the time, but because I was able to do my detox in Bath at Burlington Street, I could have regular contact with my kids – and this meant the world to me.

DHI helped me become more independent. After completing my detox, I moved into Barton Buildings, which DHI also ran. They provided drop-in visits to make sure I was doing well but gave me the freedom to ensure I was prepared for an independent future. I took cooking classes, started the HAP – or Home Achievement Programme – which significantly contributed to my long-term recovery and became ready to re-enter society as a new, better man and a productive member of society. All of that was possible because of what DHI did for me.

DHI gave me my life back. And when I was ready, I wanted to give back a little bit back to them, so became a Peer mentor to help other people who might be in a similar situation to myself. This was very rewarding because others could see the change in me. An opportunity came up for an apprentice roll with Reach completing an NVQ in housing. I passed with flying colours.

Now, I live in my own home, have full custody of my two beautiful children and have done for over nine years, and have been employed by DHI within the Reach Service for the last decade! I regularly support others facing issues with drugs, alcohol, and homelessness and know the value of the support.... not just for me, but for my children

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Alison Millar – Statement on behalf of DHI and Reach

Introduction

Zahra (not her real name) and her family were at significant risk of becoming homeless when she was referred to Reach. Reach is the DHI service which provides practical and emotional support to help people live independently and develop useful life skills. Zahra's landlord wanted to take back their home to sell, issuing a Section 21 no fault eviction notice.

As a Kurdish refugee family of 5, living in private rented accommodation in Bath, they were unsure what to do when they received the eviction notice. Having small children and little time to seek a suitable affordable alternative, the family were barely coping when they contacted DHI's REACH service.

REACH advisors were able to quickly assess the situation, promptly setting Zahra up on BANES' Homesearch site, where she was awarded a B Banding. The banding did not reflect the urgency and severity of Zahra's family situation and the REACH team advocated an A banding due to the close eviction date.

With the assistance of the team, Zahra was able to secure a new home before being evicted. With a high degree of legal housing knowledge and expertise, the team also applied successfully to court for an extension at her existing property while some essential repairs were made to her new accommodation.

The family were also supported by Reach to apply for funding for carpets and furniture, in changing Zahra's address for utilities and benefits, and in getting an extension on her daughter's Personal Independence Payments pending the Home Office decision on indefinite leave to remain.

The REACH team made sure Zahra knew her rights and the law and supported her at every step to secure safe and stable long-term accommodation.

Reach's support meant that the family were able to avoid having to move to temporary accommodation. This resulted in a significant financial saving to the council and minimised disruption to family life including schooling. The cost of temporary accommodation ranges from approximately £600 per week in Dartmouth Avenue (the local authority temporary accommodation) to approximately £1200 a week for a hotel if Dartmouth Avenue was full, which it generally is. Hotel accommodation would not necessarily be in B&NES causing additional disruption to an already vulnerable family.

None of this begins to touch on the long term costs which would have been incurred by society had the family been evicted. For instance, evidence shows that a child spending time brought up in temporary accommodation suffers lifelong disadvantages. They are significantly more likely to have poor health and educational achievements, more likely to experience mental ill health, substance misuse problems, and become an offender in later life. The REACH teams actions – in this and in an average of 900 cases a year - contribute to prevention of many longer-term issues, avoiding massive cost to both the individuals and to the local authority.

Across Bath and North East Somerset, many families are homeless or are facing homelessness right now. Many of these are working but cannot afford their mortgages or rents and are at risk of losing their homes. Children are struggling. Families teeter on the edge of keeping their lives together.

The UK has an unprecedented national housing emergency. Developing Health and Independence's REACH Service is working hard to address this so that nobody must face homelessness. It has itself restructured and remodelled using charitable funding over the past few years in order to be as efficient as possible.

As a registered charity, DHI applies and receives funding from a variety of Trusts and companies. The David Medlock charitable trust is currently funding DHI with a far reaching programme of digital transformation, a programme which is enabling services to offer earlier interventions and increase throughput. Not only would budget cuts in this area remove the service but they would mean the added value from fundraised income, company giving (including companies such as Touchstone and Merlin) will be lost, as well as the volunteer support and a placement of choice for social work students from Bath university.

It would be very difficult for the council to apply for additional funding, for example for clients in rent arrears or needing resettlement packages or to develop services from the range of charitable trusts available to DHI, since many that fund DHI, Reach or its clients, do not allow statutory services to apply for funds.

Finally Reach is a long established respected partnership service, pulling from the joint expertise of 3 respected organisations: DHI, Homegroup and Clean Slate. It is the go to agency for housing support for all the agencies in B&NES, including the Housing Options Team, who since the Housing Reduction Act 2018, use Reach extensively in executing some of their statutory duties including Personal Housing Plans which are critical to the prevention of homelessness.

Statement by Rosie Phillips, CEO of Developing Health & Independence (DHI)

We recognise and understand the difficult position the council find itself in and DHI are committed to work with council colleagues to manage and mitigate the impact of cuts. Indeed, we have been remodelling services for years to ensure we can manage in the financial climate we have been faced with since Covid. However, I would like to comment on the current proposals.

The VCSE on the face of it appears to be bearing a disproportionate amount of the cuts. I understand, in part, this is due to the council discharging its statutory duties – however, the VCSE brings much added value, and plays a major role in preventing people needing from needing costly statutory provision.

Within the proposed 21% cut from VCSE, a disproportionate amount of that is proposed to come out of housing and housing related support services (34%) - yet housing is critical to all other outcomes; and we are still suffering the effects of inflation, which have put many individuals and families who would normally cope at increased risk of homelessness; housing being the single biggest cost pressure for most of us.

Having worked for over the 30 years to promote social inclusion among vulnerable and marginalised groups, I know that a safe place to live is a prerequisite to achieving effective outcomes for those with a drug or alcohol problem, those suffering from mental ill health, fleeing domestic violence, for ex offenders, not to mention hard working families on a low incomes and their children. It is an essential foundation for any other intervention to succeed.

The distress that a lack of a settled home can bring is immense. It can cause or intensify social isolation, create barriers to education or paid work and undermine mental and physical wellbeing.

Children brought up in temporary accommodation are much more likely to experience all kind of negative outcomes and we know the trauma brings lifelong effects.

They are more likely to be excluded from school, be a victim of knife crime, use drugs problematically, be exposed to exploitation by adults, and inducted into a criminal lifestyle...thus perpetuating the cycle.

Ensuring people are given support to prevent the very costly business of homelessness, must surely be prioritized, especially at a time when many are seriously affected by the very inflationary pressures the council itself is grappling with.

And Homelessness – which is expensive for the taxpayer, society, and individuals – is increasing.

I urge the council to either delay the cut, giving time for recommissioning and a sensible planned approach to managing reduced resources. [In difficult times such as these I can see the temptation for the council to focus on supply rather than demand..](#) However, prevention is not a luxury, you can afford to do without for 12 months. It is the rational approach to managing demand so statutory services can cope.

However, if a delay and recommissioning is really not an option, I urge the council to rethink the current proposal that puts the biggest burden on housing and housing related support, to find a **better balance**, and to prioritise services that prevent more families and individuals falling into homelessness.

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The following questions are for the forthcoming CAHW Policy Development Scrutiny panel in relation to the Budget consultation 2024 to 2025 which is currently out for consultation:

Becky Brooks from 3SG

1. Is the Panel aware of what individual contracts make up the £802,000 saving within the Community Support Contracts outlined in the budget consultation papers?

Panel Member Response

The panel is aware of the proposal to deliver community support contract savings and the current contract providers in scope for the review. Also, the providers of impacted contracts will be consulted on following the adoption of this savings proposal by full Council. Attached are the list of the community services providers.

Cabinet Member / Officer response

As a council we have reviewed saving opportunities on several contracts across the provider sector and this make up the £802k. The commissioning of the housing support contracts worth 552k and the ASC contract are worth £250k with HCRG Care Group and if following the consultation decision is to reduce the contract value to HCRG Care Group in the Direct Award, we will work with HCRG Care Group to help achieve the £802k savings.

2. Is the Panel aware that the average saving being asked of Council departments is around 4.9% and that the expected saving of £802,000 equates to a 21.4% cut in funding to the Third Sector and is the highest expected cut within the total budget?

Panel Member Response

The panel is aware of the difference and has been presented with a range of savings plans within the Adults Services portfolio, these total £2.3m for 2024/25, the Council's finance team have confirmed this is 3.84% of the current net revenue budget of £60.3m for the Cabinet Portfolio.

Cabinet Member / Officer response

We have applied the budget setting process principles set out in the consultation paper consistently across all council services and budgets. We prioritised available limited resources to provide budget growth for services delivering statutory responsibilities. In developing savings proposals, we prioritised looking at discretionary services.

3. Given that the average cut being asked of all Council departments is 4.9%, would the Panel agree that it is more appropriate to reduce Community Support contracts by this amount and ask for the additional savings to be met by the 10

other Council departments making an additional £62k saving each? This would be without adding any further burden on Children or Adult Services.

Panel Member Response

The panel will scrutinise the budget proposals that have been put forward and its summary findings will be shared with the Cabinet.

Cabinet Member / Officer response

Proposals for alternative options to meet significant financial challenges set out in the consultation and produce a balanced budget are welcome and would be considered fully as part of the consultation. Outcome of the consultation would inform the budget setting decisions planned in February.

Roanne Wootten from Julian House

1. What will be the impact, if a third of these services are cut? In addition to the obvious human impact, has the financial impact been considered? Given that widespread research shows that the cost of preventing and solving homelessness is less than the cost of doing nothing at all. [Cost of homelessness | Crisis UK | Together we will end homelessness](#)

To clarify the consultation proposals include reducing the total housing support contract value by a third rather than cutting a third of services. That said, the Council acknowledges that this scale of reduction cannot be achieved without significant impacts on providers and service users. It is also acknowledged that on an individual level preventative action is more cost effective than doing nothing at all. It can be challenging to attribute a robust downstream financial saving to a particular prevention service. As such the Council would welcome providers supplying any evidence or comments on the prevention savings provided by their commissioned service.

2. Cutting accommodation and support for homeless individuals will likely lead to a surge in rough sleeping, worsen health outcomes, and overwhelm already stretched statutory services. What plans does the authority have to mitigate the consequences of the cuts to vital services for homeless people? Given the 15th of January consultation deadline, when will the Equality Impact Assessment be made public?

At this stage, the Council is consulting on the proposals to reduce funding and no decisions have yet been made. If funding reductions are agreed, then it is anticipated that any such reductions will be targeted to ensure that services meeting the Council's wider strategic housing ambitions and statutory responsibilities are prioritised and commissioners will work with providers on a revised delivery models. As stated above, the Council acknowledges that this

scale of reduction cannot be achieved without significant impacts on providers and service users.

3. B&NES experiences unique challenges with exceptionally high housing and rental costs; is cutting housing-related support for homeless individuals the most strategic budget reduction? Why target this crucial area, as opposed to others, when it will exacerbate an already challenging situation?

We recognise that the local housing sector is experiencing significant financial and operational pressures. Making significant financial savings is challenging and this is one area of the Council's business that is being considered alongside all other areas. To protect statutory services attention has been focused on discretionary services.

Rosie Phillips, Chief Executive Officer, DHI

1. What is the Council's rationale for cutting preventative housing related services when a lack of stable accommodation impacts many key outcomes, including health inequalities, and has a particularly detrimental and lifelong impact on children? A child brought up in temporary accommodation is more likely to experience poorer educational achievement, be excluded from school, suffer poorer physical and mental ill health, misuse drugs and alcohol and be more likely to become an offender in later life.

At this stage, the Council is consulting on the proposals to reduce funding and no decisions have yet been made. If service reductions are agreed, then it is anticipated that any such reductions will be targeted to ensure that services meeting the Council's wider strategic housing ambitions and statutory responsibilities are prioritised, and commissioners will work with providers on revised delivery models.

2. Are you able assure us that short term government grants are not being used in the rationale for savings on long term contracts?

The Council has not used short term government grants in the rationale for developing savings proposals on long term contracts.

3. Accepting the very difficult decision the Council is faced with, how are you ensuring you get the most effective balance i.e., one that takes account of supporting a small number of visible rough sleepers, a much larger number of homeless families and individuals, while preventing people from becoming homeless and requiring accommodation and support in the first instance?

The Council is required to make significant financial savings as documented in the consultation and making any saving is challenging. To protect statutory services attention has been focused on discretionary services. The Council acknowledges that this scale of reduction cannot be achieved without significant

impacts on providers and service users. and if funding reductions are agreed, commissioners will work with providers on revised delivery models.

Beth Hendry, Director of Operations, DHI

1. What would happen to any homeless people who desire detox and abstinence-based accommodation to turn their lives around if Burlington Street is no longer available?

At this stage it is the consultation process about potential savings from these budgets. Should these proposals be approved, the Council would move on to develop plans on how these savings would be delivered.

2. Have the Council considered the financial impact for blue light and other statutory services if such a facility is not available? Has the ICB or police been involved in this decision-making process?

As stated above, it is the consultation process and decisions about savings have not been taken yet.

Service Provider	Community Service Providers
Bath Mind	Community Based Mental Health Pathways - Mosaic Mental Health Support
Bath Mind	Community Based Mental Health Pathways - Safe Haven
Creativity Works	Community Based Mental Health Pathways - Creative Links
Soundwell Music Therapy Trust	Community Based Mental Health Pathways - Music Therapy
Soundwell music therapy trust as part of St Mungos block	Community Based Mental Health Pathways - Social enterprise project (SP) (St Mungos)
St Mungos	Community Based Mental Health Pathways -Mulberry House & Mews
West of England Community Care	Community Equipment- Home Safety Equipment Scheme - Public Health
The Carers Centre	Adult Carers Support Service - New Carers Centre
Alzheimer's society	Living Well and Staying Well (Prevention and Self Management) - Day Services
Peggy Dodd	Living Well and Staying Well (Prevention and Self Management) - Day Services
Alzheimer's society	Alzheimer's Society - Dementia Support Worker Service
RICE	Research Institute for the Care of Older People - Dementia Assessment service
WECIL	Direct Payments Support
Curo	Extra Care Housing Services - Extra Care Schemes
Curo	Extra Care Housing Services - Step Down Beds
Guinness	Extra Care Housing Services - Avondown House
Knightstone	Extra Care Housing Services - Rockhall House
Knightstone	Extra Care Housing Services - The Orchard
Knightstone	Extra Care Housing Services - The Paddocks

Methodist Homes	Extra Care Housing Services - Walcot Court
Age UK	Regaining Health & Independence - Dementia Support Worker Service
Age UK	Regaining Health & Independence - Home Response
The Carers Centre	Regaining Health & Independence - Dementia Support Worker Service
Dorothy House	End of Life Care
Bath Mind	Homelessness Prevention Pathway Services - Marlborough Lane low level MH accommodation & support
Curo	Homelessness & Housing Support - Temporary Accommodation - Somer
Curo	Homelessness Prevention Pathway Services -Temporary Accommodation - Dartmouth
DHI	Homelessness Prevention Pathway Services - Developing Health and Independence - 1 Barton Buildings
DHI	Homelessness Prevention Pathway Services - Developing Health and Independence - Reach
DHI	Homelessness Prevention Pathway Services -Developing Health and Independence - Burlington Street (EX Stall street)
DHI/Julian House	Homelessness Prevention Pathway Services - DHI & Julian House - Assertive Outreach Service
Julian House	Homelessness Prevention Pathway Services - Julian House - Barnabas House and Annex
Julian House	Homelessness Prevention Pathway Services - Julian House - Henrietta Street
Julian House	Homelessness Prevention Pathway Services - Julian House - Manvers Street
Julian House	Homelessness Prevention Pathway Services - Julian House - Peter House
Second Step Housing Association	Homelessness Prevention Pathway Services - BANES Floating Support Service
Solon South West Housing Association	Homelessness Prevention Pathway Services - Rackfield House
Stonham	Homelessness Prevention Pathway Services - Newbridge Road
Stonham	Homelessness Prevention Pathway Services - The Paragon
Curo	Positive Accommodation and Support Pathway - Bath Foyer
Curo	Positive Accommodation and Support Pathway - Mediation Service

Curo	Positive Accommodation and Support Pathway - Pathways
Curo	Positive Accommodation and Support Pathway - Young Parents Service
Curo	Independent Living Service - including Older People
Curo	Independent Living Service - Livewell formerly Sheltered
Curo	Independent Living Service - Rural Dementia Service
Community Pharmacies	Integrated Sexual Health Service - Pharmacy Sexual Health
General Practices	Integrated Sexual Health Service -General Practice - LARC including fitting of IUD's
General Practices	NHS Health Checks
Freeways	Adults with a learning disability and their families - Freeways - PSI/LD New FS service
Keyring	Adults with a learning disability and their families - Keyring - Living Support Networks - Bath Keyring Network
Swallow Ltd	Adults with a learning disability and their families - Hawthorns
Swallow Ltd	Adults with a learning disability and their families - Redfield Road
Swallow Ltd	Adults with a learning disability and their families - Training for Independent Living
Stroke Assoc	Specialist Neurology and Stroke Services (Adults) - Communication Support Service
Stroke Assoc	Specialist Neurology and Stroke Services (Adults) - Community Stroke Co-ordinator
Community Pharmacies	Substance Misuse Services - Community Pharmacies - Pharmacy Needle Exchange
DHI	Substance Misuse Services - Integrated Drug & Alcohol Treatment Service
DHI	Substance Misuse Services - Young People& Substance Misuse Service
GP Practices	Substance Misuse Services - General practice - Drugs Misuse GPs
Age UK	Regaining Health and Independence (Early Intervention and Targeted) - - Older People's Information Service
Age UK	Regaining Health and Independence (Early Intervention and Targeted) - Day Services
Bath Ethnic Minority Senior Citizens Association	Regaining Health and Independence (Early Intervention and Targeted) - Day Services for B&OME NB + £5,200 rent deducted at source

Clean Slate	Regaining Health and Independence (Early Intervention and Targeted) - Worklessness
Community Pharmacies	Regaining Health and Independence (Early Intervention and Targeted) - Pharmacy Smoking
Counterweight Ltd	Regaining Health and Independence (Early Intervention and Targeted) - Counterweight Services
Deaf Plus	Deaf, Deaf Blind and Visually Impaired Equipment and Support Service
DHI	Stop Smoking - DHI (activity-based payment)
General Practices	Regaining Health and Independence (Early Intervention and Targeted) - Smoking in general practice
Julian House	Homelessness Prevention Pathway Services - Julian House - Travelling Community Support Worker
RUH	Regaining Health and Independence (Early Intervention and Targeted) - Health in pregnancy
Village Agents	Wellness Service - Village Agents
Wiltshire Community Health	Regaining Health and Independence (Early Intervention and Targeted) - Counterweight Services
Writhlington	Writhlington
DHI	Regaining Health and Independence (Early Intervention and Targeted) - Social Prescribing
Quartet	Regaining Health and Independence (Early Intervention and Targeted) - Community Fund (MH)
St Mungos	Regaining Health and Independence (Early Intervention and Targeted) - Building Bridges / Peer Mentoring

Children's Services Lead Member Report to CAHW Panel

15th January 2024

Intro

As agreed, my report is relatively brief to allow additional time to discuss Adults' and Children's Services budgets at this meeting.

Service pressures

Following my last update on the pressures facing the SEND and education teams, I am pleased to say that some progress is being made in improving service delivery. The issues of demand and sufficiency remain the same, but the teams are being assisted to work more effectively and supported by the additional capacity and experience of new managers.

Home-to-School Transport

Education and Transport teams are drafting a new HTST policy. This policy is in response to the Department for Education's consultation on changes to the statutory Home to School Transport guidance issued by the DFE in 2014. In July this year, the DFE concluded this consultation and issued updated guidance for all local authorities. All LAs are expected to update their HTST policies per this guidance by September 2024.

Our new HTST policy is being redrafted as we speak. As part of the development of the policy, we will go through a consultation process with parents and carers and our solicitors examine our policy to ensure we comply with the new DFE guidance. I plan to ask officers to bring the draft policy to scrutiny in May 2024. We aim to implement the new policy in time for the new academic year in September 2024.

Corporate Parenting

A Corporate Parenting meeting (CPM) is scheduled for Wednesday, the 17th of January; we hope to make it a face-to-face meeting. I reported to the last full council that I am seeking protected status for care leavers (care experienced). At this meeting, I will discuss the reasons behind this recommendation and the need for a council joint motion to promote and adopt this status. I have also spoken to Curo, seeking their similar support, though, of course, we will need the council to adopt the proposal first.

Faulty concrete in schools (RACC)

So far, no RAAC has been identified in B&NES schools. However, the DFE have commissioned and instructed LAs and Trusts to conduct more intrusive RAAC examinations of school buildings. When findings of these reports become available, we will report anything that detrimentally affects education provision in B&NES.

DFE Safety Valve scheme.

In previous panel reports, you will have read about the DFE's Safety Valve programme and the work officers are doing to improve our placements and services for children with SEND. Whilst this programme has challenging expectations from the DFE, there are many positive developments that

the programme will deliver. I will ask officers to bring a full report to scrutiny to bring a spotlight on this work.

Evidence based working.

Children's Services is adopting a new data and finance system in March of this year. In time and with the support of finance and business intelligence colleagues, we should be able to produce more evidenced-based performance reports for teams within Children's Service. Once these systems have been tested, we will ensure these reports are available to the panel.

Report for Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel – Monday 14 January 2024

Paediatric Urgent Service Hub Clinics

BaNES based GP federation BaNES Enhanced Medical Services has launched the Paediatric Urgent Service Hub (PUSH) which will run until the end of March 2024.

This service is for children aged five and under with fever symptoms and operates afternoon clinics from surgeries in Midsomer Norton, Paulton, Peasedown St John, Radstock, Coombe Down and Keynsham

Appointments can be made via remote booking and can be same-day bookable. The service offers extra capacity and appointments during the busy winter period. Since the service was launched in December, more than 150 children have been seen in these clinics and further clinics supporting areas of known deprivation will roll out from January.

BaNES Integrated Care Alliance Winter update

BaNES Integrated Care Alliance has developed a joint approach to delivering services and supporting citizens across BaNES during winter 2023/4, with a focus on maximising capacity of our existing services. Progress has been steady and has included:

- Our virtual wards are now well established in B&NES – a step-up model to reduce avoidable admission provided by HCRG Care Group and step-down model provided by the Royal United Hospital to expedite discharge. We continue to see increased occupancy, and both services have received excellent feedback from patients. The Virtual Wards have significantly helped to maintain flow this winter, particularly in supporting the closure of the Homeward unit.
- The Homeward unit closed on 30 November with successful transfer of care of all occupants. Data suggests the impact of this has been mitigated.
- In the RUH, the Non-Criteria to Reside numbers for BaNES, (a key national metric), continued to consistently meet the target of below 20, and in our community hospitals, we have averaged around 15. The system overall remains pressured.
- We have undertaken monthly community MADE (Multiagency discharge events) to track each patient and understand any pathway blockage. Daily social care forums taking place, in line with changes to social care scrutiny – linking with MADE events to reduce any impact on flow. We have reviewed access to domiciliary care for reablement to maximise flow
- Discharge Hub working groups are being implemented BSW-wide to support consistency and best practice sharing across the ICB.

Women's health hubs

Women across BSW and BaNES will benefit from tailored healthcare and support by coordinating services in a new women's health hub model which aims to improve the experience for girls and women in accessing better integrated services.

The hub will look to improve access to services for menstrual problems, contraception, pelvic pain, menopause care and more.

Along with all other ICBs across England, BSW ICB has received over £600,000 in funding until 2025 to expand or establish a women's health hub that focuses on delivering more intermediate care in the community, taking a life course approach that better reflects the lives of girls and women and enables them to access support and care for a range of needs through a one-stop-shop approach.

This approach aims to tackle what have been fairly fragmented services in terms of women's health. To date, women are often expected to attend multiple appointments and go to different places to access these essential services.

The Women's Health Hub will be developed by partners across BSW including the NHS, public health teams, the Voluntary, Community and Social Enterprise (VCSE) sector and engagement with local people.

Work is still ongoing on how to utilise the funding this year to explore women's health hubs and experience for women's health needs. A framework for the decision making is being created to easily put forward proposals and bids, with a central steering group making decisions on projects.

Industrial action

Junior Doctors across hospitals in BSW took part in Industrial Action from 20th to 23rd of December and from January 3rd to 9th.

Coming at the busiest time of year for our local health and care services, the Industrial Action has resulted in disruption, including increased waiting times and a high number of cancelled appointments.

BSW Integrated Care Board and system partners have worked hard to keep local people safe during the strikes, while delivering the best care possible. We worked with partners to ensure the smooth running of services and provided a coordinated communications campaign to let the public know how to access services and where to look for help.

Primary Care Dental Services Update

Since receiving delegated responsibility for community pharmacy, optometry and dental services, work has duly commenced for understanding local plans specifically for the BSW population.

Specifically for dental services, the main focus has and remains to be, on restoring access to dental care for the population.

The outcomes of the 2022 / 2023 dental contract negotiations set out a package of reform, seeking to address the current challenges associated with delivering care to higher-need patients.

In October 2023 NHS England published its flexible commissioning guidance, originally issued in 2021, the updated guidance aims to make the current NHS dental contracts more adaptable by allowing a proportion of the commissioned UDA's to be filled through locally agreed schemes. Its purpose is to prevent poor oral health, protect and expand access and deliver high-quality care as well as aid the restoration of mandatory services such as examination and diagnosis.

The ICB continue to work with Local Authority Public Health colleagues to fully understand the oral health needs of the population and to fully utilise the newly published guidance, making it easier to access NHS care with the current national dental contractual framework also enabling the ICB to tailor services to meet specific population needs, and to take steps to support practices with changes to Units of Dental Activity (UDA) values, where this presents clear value for money. A further presentation is appended to this report.

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