

Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel

Date: Monday 16th June 2025

Time: 9.30am

Venue: Council Chamber - Guildhall, Bath

Councillors: Dine Romero, Liz Hardman, Paul Crossley, David Harding,
Lesley Mansell, Joanna Wright, Onkar Saini, Bharat Pankhania and
Michael Auton

Co-opted Non-Voting Members: Chris Batten and Kevin Burnett

The Panel will have a pre-meeting at 9.00am



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NOTES:

1. **Inspection of Papers:** Papers are available for inspection as follows:

Council's website: <https://democracy.bathnes.gov.uk/ieDocHome.aspx?bcr=1>

2. **Details of decisions taken at this meeting** can be found in the minutes which will be circulated with the agenda for the next meeting. In the meantime, details can be obtained by contacting as above.

3. **Recording at Meetings:-**

The Openness of Local Government Bodies Regulations 2014 now allows filming and recording by anyone attending a meeting. This is not within the Council's control.

Some of our meetings are webcast. At the start of the meeting, the Chair will confirm if all or part of the meeting is to be filmed. If you would prefer not to be filmed for the webcast, please make yourself known to the camera operators.

To comply with the Data Protection Act 1998, we require the consent of parents or guardians before filming children or young people. For more information, please speak to the camera operator.

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4. **Public Speaking at Meetings**

The Council has a scheme to encourage the public to make their views known at meetings. They may make a statement relevant to what the meeting has power to do. They may also present a petition or a deputation on behalf of a group.

Advance notice is required not less than two full working days before the meeting. This means that for meetings held on Thursdays notice must be received in Democratic Services by 5.00pm the previous Monday.

Further details of the scheme can be found at:

<https://democracy.bathnes.gov.uk/ecCatDisplay.aspx?sch=doc&cat=12942>

5. **Emergency Evacuation Procedure**

When the continuous alarm sounds, you must evacuate the building by one of the designated exits and proceed to the named assembly point. The designated exits are signposted. Arrangements are in place for the safe evacuation of disabled people.

6. **Supplementary information for meetings**

Additional information and Protocols and procedures relating to meetings

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**Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel - Monday
16th June 2025**

at 9.30am in the Council Chamber - Guildhall, Bath

A G E N D A

1. WELCOME AND INTRODUCTIONS

2. EMERGENCY EVACUATION PROCEDURE

The Chair will draw attention to the emergency evacuation procedure as set out under Note 5.

3. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

4. DECLARATIONS OF INTEREST

At this point in the meeting declarations of interest are received from Members in any of the agenda items under consideration at the meeting. Members are asked to indicate:

- (a) The agenda item number in which they have an interest to declare.
- (b) The nature of their interest.
- (c) Whether their interest is **a disclosable pecuniary interest** or an **other interest**,
(as defined in Part 4.4 Appendix B of the Code of Conduct and Rules for Registration of Interests)

Any Member who needs to clarify any matters relating to the declaration of interests is recommended to seek advice from the Council's Monitoring Officer or a member of his staff before the meeting to expedite dealing with the item during the meeting.

5. TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIRMAN

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

At the time of publication no notifications had been received.

7. CABINET MEMBER UPDATE (Pages 7 - 12)

The Cabinet Member(s) will update the Panel on any relevant issues. Panel members may ask questions on the update provided.

8. B&NES, SWINDON & WILTSHIRE INTEGRATED CARE BOARD (BSW ICB) UPDATE (Pages 13 - 16)

The Panel will receive an update from the B&NES, Swindon & Wiltshire Integrated Care Board (BSW ICB) on current issues.

9. RESPITE SERVICES UPDATE (Pages 17 - 30)

This report updates on progress made since April, including the findings of the needs analysis, options appraisal and next steps.

10. CARERS STRATEGY UPDATE (Pages 31 - 34)

This report outlines progress towards the Carers Strategy Activity Plan, which has developed since the last update to Scrutiny.

11. THE ACTIVE WAY (Pages 35 - 52)

A presentation is within the agenda pack for the Panel regarding this subject .

12. MINUTES: 12TH MAY 2025 (Pages 53 - 70)

13. PANEL WORKPLAN (Pages 71 - 76)

This report presents the latest workplan for the Panel. Any suggestions for further items or amendments to the current programme will be logged and scheduled in consultation with the Panel's Chair and supporting officers.

The Committee Administrator for this meeting is Mark Durnford who can be contacted on mark_durnford@bathnes.gov.uk 01225 394458.

Lead Member (adult services and public health) report for Scrutiny – June 2025

A. Statutory Services

Following the transfer of statutory services back to the council in April 2024, our focus has been on improving operational performance to ensure that we are meeting the needs of our residents. This will include some re-design of services and investment in areas such as Occupational Therapy which has had long standing problems with waiting times. We will be consulting with staff on the proposed re-design in the coming weeks and will update on this more fully at the September meeting of this panel.

Waiting times

In January 2025 there were **122** people awaiting allocation for a Care Act Assessment. The median wait for allocation was **53** days. As of 1st June 2025, there are **112** people awaiting allocation with a median wait of **34** days. Demand for adult social care continues to rise with the service completing 20% more assessments in the first quarter of 2025 than in the previous quarter.

In January 2025 **1,240** people had received an annual review in the last 12 months with **523** waiting for a review. As of 1st June 2025 **1,264**, have received an annual review with **491** people waiting for a review. Our annual review figures are above the English average and now stand at **73%**. There has been a significant increase in the number of people who require an unscheduled review in addition to their annual review. The service has undertaken **566** unscheduled reviews in the last 12 months in addition to the annual reviews. All reviews are risk rated and prioritised accordingly. ASC have secured 8 agency staff for a period of 3 months to support the reducing the waiting lists for both assessments and reviews.

Occupational Therapy assessments continue to be a focus of high demand, receiving on average **85** new requests per month, robust management has seen the numbers waiting for OT assessment reducing from **247** people waiting at the time of our CQC inspection to **201** people waiting in January 2025. As of 1st June, there were **209** people waiting for an Occupational Therapy Assessment a slight increase. We have now recruited to 3 long standing vacant posts and ASC have engaged a specialist Occupational Therapy agency to support reducing the numbers waiting, this work will commence on the 16th June, assessing an initial cohort of 50 people.

Deprivation of Liberty safeguards (DoLs) have 4 prioritisation categories, Urgent, High, Medium and Low. These are further split into new requests and annual renewals. Due to pressures on ASC, it is highly unusual for a Local Authority not to have a DoLs waiting list. In January 2025 there were **509** people on our DoLs waiting list. As at 1st June 2025 there are **452** people on our waiting list. We continue to work on streamlining our processes and are training 4 of our social work staff as Best Interests Assessors who will carry out a set number of renewals each year to support waiting list reduction.

Newton House/respite

See separate report

B. Regulated services

Adult Regulated Services

Our focus continues on improving the quality of all our regulated services. Care for Quality have again visited the services (each CRC and 3 Extra Care Services) over recent weeks to undertake mock inspections and we are awaiting full reports to be issued for two of the Extra Care Services inspected (Orchard and Greenacres). The full report for Avondown demonstrates that the service is Good in each CQC domain of Safe, Effective, Caring, Responsive and Well Led. Initial feedback from the inspector at Greenacres Court refer to 'People said they like living at Greenacres, people feel safe and supported to live independently. I observed positive engagement between staff and people who are treated with dignity'. The inspector at The Orchard referred to 'Observation of support staff engaging with people was positive. People told me they felt safe and supported and people feel cared for.

We have received the full mock inspection reports for each of the Community Resource Centres (Cleeve Court and Combe Lea) and there has been positive movement in the scoring and rating for Cleeve Court under 4 the 5 CQC domains of Safe, Caring, Responsive and Well Led with Effective remaining unchanged. The action plans resulting from the Care 4 Quality mock inspections are incorporated into the services CQC action plan and monitored monthly at the Improvement Group.

Quarter 1 (2025/26) Good Governance Audit has been completed by the DASS at each of our Community Resource Centres. This has focussed on the newly introduced digital care planning system (Care Control Systems – CCS) into our care homes. The visit to Combe Lea included meeting with several front line care workers and residents. The audit feedback refers to the new digital care planning system as enabling the 'voice of the person to really shine through' and capture how dedicated and skilled staff are in helping the residents achieve their full potential.

Cleeve Court continues to focus on staff recruitment which has resulted in several new staff joining the team with a few staffing vacancies still left to recruit to. Comprehensive inductions enable new staff to learn our systems, support the moving in of new residents and the building of person-centred care plans. Cleeve Court continues to work with Brokerage colleagues to take on new admissions with 4 bed vacancies, there are currently 2 bed vacancies at Combe Lea.

Robust management controls for budget oversight, absence management and use of agency will continue this year and be monitored at monthly finance meetings.

C. Provider Services

Learning Disability Services

The Connections Day centre in Radstock has worked in partnership with Volker to create a purpose built cycleway within its grounds. The centre owns a number of different models of adapted bikes for service users and aims to increase their use with this facility. This is a fantastic addition to the activities provided at Connections, it will help service users to understand issues relating to road safety in a safe space and may foster further links with the Somer Valley Links initiative..

<https://www.volkerhighways.co.uk/en/news/new-cycleway-connection-day-centre>

D. Commissioning Carers

See separate report on the Carers strategy

Ageing Well B&NES Programme Update

The Ageing Well B&NES Programme, which follows the World Health Organisation's Age Friendly Framework is an initiative, led by age UK, that is supporting B&NES to become an age friendly community. The programme is overseen by a local steering group, of which I am a member and current priorities include travel, health, ageism, raising older people's voice, digital inclusion, and access to public toilets. Specific initiatives include an age friendly transport project (looking at accessibility) and an age friendly volunteering and employers' project.

Other inputs from the council come from Public Health, Leisure Services, Transport, and Community Engagement and it has recently been agreed that the Age Well Commissioning Manager will be joining the steering group to represent commissioning. Conversations are underway between commissioning and Age UK B&NES to facilitate input to the State of Ageing report. This draws on the 2024 summer survey of residents and is due to be published in October 2025. Age UK are seeking further contacts within the Council to discuss priorities arising from the summer survey and contribute to the report.

The programme has also set up an Older People's Voice Forum to enable older people to share experiences, concerns, and ideas for ageing well policies and initiatives. The forum was launched in January 2025 with about 70 attendees, three quarters of whom signed up to be active members.

The work of the programme is further supported by the Ageing Well Network facilitated by 3SG. The network provides a platform for its members to share knowledge, engagement, drive programme delivery and promote better working together. One area of focus is to develop a B&NES Dementia Strategy (as was discussed at our last meeting) as a useful tool to help people and families impacted by dementia to develop a clear pathway for support and care. Development of this strategy is at an early stage, with initial scoping workshops facilitated by ReMIND planned for June. The strategy will align to strategic initiatives for people with dementia led by the BSW ICB and will be informed by the latest knowledge base, such as the 'Health and social care support for people with dementia' report published by the Care Quality Commission on 20th May 2025.

E. Finance

Despite the rising demand for adult social care, the budget for Adult Social Care for the fiscal year 2024/25 was balanced. This outcome included realising the savings that were presented to the panel in 2024.

F. CQC Inspection

Implementation of the CQC action plan is being overseen by an Improvement Board to ensure that progress is being made as required. Progress will be reported to this panel at a future date.

G. Public Health

1. Annual Director of Public Health Report

Last year's B&NES DPH report on Food Security has been chosen as one of the top 5 (out of 67) public health reports in England which is a huge achievement for our public health team, the comms team, other council colleagues and many providers in the Fair Food Alliance, particularly as we are a relatively small authority:

<https://www.adph.org.uk/news-and-events/news/>

2. Assurance

The South West DHSC Office for Health Improvement and Disparities is piloting a new approach to providing assurance back to Government ministers of the Public Health Ring-fenced Grant in local authorities. The approach is based on a structured submission of information prior to two in-person meetings. The first meeting is with each local authority involving as a core group the Regional DPH, DPH, Chief Executive, S151 Officer and lead Cabinet Member. The second meeting is with the ICB, involving as a core group the Regional DPH, DsPH, ICB Chief Executive, ICB Finance Officer, Chief Medical Officer and ICB prevention lead. The visits are designed to understand more about the overarching spend of the Public Health Ring-fenced Grant, be supportive in nature, and capture good practice. For B&NES the first of the two meetings will be on 9th June. The date for the second is being confirmed.

3. Physical activity and leisure services

The number of people playing sport and taking part in physical activity in England is at the highest level on record, according to the latest Active Lives Adult Survey Report. The new figures show that, between November 2023 and November 2024, 63.7% of the adult population met the Chief Medical Officers' guidelines of doing 150 minutes, or more, of moderate intensity physical activity a week.

For Bath and North East Somerset 68.2% of adults are classed as active which is higher than the national figure. 19.8% of adults are inactive compared to 25.1% of adults nationally. There has also been growth in activity levels for older adults and disabled people, but more work is needed to support those living in the areas of greatest deprivation.

<https://www.sportengland.org/news-and-inspiration/record-numbers-playing-sport-and-taking-part-physical-activity>

A consultation process has just started on revised proposals for further development of the Odd Down Sports Facilities: [can be viewed online](#). Feedback from the proposals will be used to shape the revised planning application for this site.

The Bath Beach is about to open for its summer season in Royal Victoria Park.

Midsomer Norton's new attraction, the coal heritage-themed Dynamite Adventure Golf Course, opened on Saturday 17th May. The 18-hole adventure golf course is now welcoming visitors and is a fun-packed and informative experience for all the family. The course is suitable for anyone aged four and upwards, with paths for pushchairs and wheelchairs.

4. Pharmaceutical Needs Assessment

Legislation requires that every three years every Health and Wellbeing Board assesses the need for pharmaceutical services in its area and publishes a statement of its assessment. The Public Health Team leads this work on behalf of the HWB. In May a public consultation for the [2025-2028 B&NES Pharmaceutical Needs Assessment](#) was launched. This has already been circulated to all PDS members with an invitation to comment on the consultation. The consultation will close at 5pm on Tuesday 1 July 2025.

5. Holiday Activities and Food Programme

The Easter *Activate Your Holidays* programme supported 711 children and young people, 276 of whom were SEND. 73.5% of attendees were primary-aged, while 26.5% were secondary-aged. During the last year, more local providers are supporting the delivery of the programme to increase the range of enriching sessions available to those eligible to access the programme. Plans are well underway for the Summer Holiday programme.

Alison Born – Cabinet Lead Adult Services and Public Health

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**Report for Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel –
Monday 16 June 2025****Update on future of integrated care boards**

In March 2025, the government announced wide-ranging reforms to the NHS, including a directive for all integrated care boards in England to reduce overall running and programme costs by 50 per cent.

A model blueprint for the future form and function of ICBs was shared at the beginning of May .

Recent guidance from NHS England indicates that, to fulfil future functions effectively and sustainably, ICBs need to work across larger footprints, serve larger populations and take into account any new strategic local authority boundaries which emerge from the local government reform process, which is also under way.

As a result, BSW, Somerset and Dorset ICBs are exploring plans to cluster together.

This proposal is still at an early stage and no decisions have been made.

Update on integrated community-based care

In October 2024, HCRG Care Group was appointed the new provider of integrated community-based care for Bath and North East Somerset, Swindon and Wiltshire, under a seven-year contract that came into effect on Tuesday 1 April.

The group will now develop and lead an innovative new partnership with the NHS, local authorities and charities that will aim to transform the care and support that people get to help them with their health and wellbeing at every stage of their lives, with more health and social care provided in or near their homes, in a more joined-up and streamlined way.

These plans align with the government's aims of moving from hospital care to community care, shifting focus from sickness to prevention and driving forward the digitisation of the health service.

A total of 1,950 colleagues transferred to HCRG on 1 April 2025 and, since that date, a 100-day safe landing plan has been in place to help address any emerging issues or risks.

The BSW Community Delivery Group, which is a system-wide group made up of partners from local authorities, the third sector, acute and mental health trusts and primary care, will oversee the transformation happening within community-based care.

This group will seek to ensure that any changes or improvements being implemented in the community reflects the views and priorities outlined in the system's overarching integrated care strategy.

HCRG's methodology for transformation is based on a person-centred design approach, and follows a four-phase process of discover, define, design and deliver.

This approach ensures that the service user is kept at the centre of all decisions along the journey, and co-design and co-delivery is built in to the process.

There are nine projects within the initial Transformation Programme, covering the following areas:

- All age single point of access with care coordination and digital front door
- Digital innovation

- Integrated neighbourhood teams
- Partnership development and community engagement strategy
- Community estates strategy
- Clinical pathway and service transformation
- Service identity and brand development
- Workforce transformation
- Outcomes framework development and benefits realisation

All of these projects are currently in the discover phase, with teams working to better understand current services and functions, while also conducting research regarding the art of the possible.

The next phase – define – will commence in the summer, and involve engagement with service users, colleagues and wider system partners.

HCRG Care Group intends to provide committee members with a more thorough, in-person update at the meeting in July.

Local uptake of Covid-19 booster vaccine

People living across all parts of Bath and North East Somerset who are eligible for the Covid-19 booster vaccination, which was first offered at the beginning of April, continue to come forward.

The booster vaccine provides people who are most at risk of falling seriously ill from Covid-19, such as those aged 75 and over, pregnant women and people living with a weakened immune system, additional immunity against the virus.

By targeting specific groups of the local population, the booster vaccine is not intended to generate herd immunity, but to ensure those most susceptible are adequately protected.

Since April 2025, approximately 60 per cent of eligible people in Bath and North East Somerset have had the booster vaccine, which is better than both the respective regional and national averages of 58 and 48 per cent.

Strong local appetite for routine MMR vaccinations in under-fives

The vast majority of families with young children in Bath and North East Somerset have been protected against measles, mumps and rubella.

Latest figures show that more than 96 per cent of under-fives in the local area have had at least one MMR vaccine.

Nationally, the figure stands at just over 92 per cent, while the South West average is slightly better at 94.8 per cent.

It is recommended for young children to have two MMR vaccines, with the first being given as they turn one and the second coming just after their third birthday.

The vaccines can also be given to older children, as well as any adults, who may have missed out on getting protected as a baby.

Late vaccinations can be arranged through a person's GP practice.

Publication of new 10-Year Plan delayed

The long-awaited 10-Year Plan for the NHS has been delayed, after initially being scheduled for publication in May 2025.

It is now expected that the plan, which was produced following an extensive months-long engagement exercise with members of the public, will now be published sometime in the second half of the year.

When it does, the plan is expected to outline how the NHS will evolve and adapt over the coming decade, and how it will utilise the latest technology to improve services, reduce waiting lists and speed up patients' access to care.

More information on the plan can be found online at www.change.nhs.uk.

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Bath & North East Somerset Council		
MEETING/ DECISION MAKER:	Children’s and Adults Health and Wellbeing Policy Development and Scrutiny Panel	
MEETING/ DECISION DATE:	16 th June 2025	EXECUTIVE FORWARD PLAN REFERENCE:
TITLE:	Respite Care	
WARD:	All	
AN OPEN PUBLIC ITEM		
List of attachments to this report:		
Annex 1: Needs Analysis Fact Sheets		
Annex 2: Options Appraisal Summary		

1. THE ISSUE

- 1.1 Respite care sometimes known as short term breaks is a crucial support system for families and caregivers. They help individuals cared for to stay at home while easing caregiving demands. Respite allows carers to rest and recharge, ensuring their well-being and maintaining the quality of care they provide.
- 1.2 The all-age respite offer within the B&NES area currently consists of respite within the home, in the community, day centres or building based services, and overnight stays outside of the family home.
- 1.3 In response to market developments, we accelerated our planned commissioning activities and initiated a comprehensive review process. The methodology for this review was presented at the April meeting. This report updates on progress made since April, including the findings of the needs analysis, options appraisal and next steps.

2 RECOMMENDATION

The Panel is asked to:

2.1 Consider content of the report and provide comments.

3 THE REPORT

Needs Analysis

3.1 To date the review team has gathered information about statutory frameworks and requirements, service descriptions and delivery models for respite care. Work to map current provision and collate current needs and demand profile has been completed across the domains of Start Well and Live Well and continues to progress for Age Well. Through this process we gathered data on several areas such as the number of people currently accessing diverse types of services, predicted future demand for services and identifying any unmet needs. Needs analysis and supporting evidence have shown that:

- The profile of respite need has changed over the past 3-5 years. This evolving picture has been informed by several factors such as changes to access to services mandated during the pandemic, options families and individuals chose when services re-started post pandemic, changes in family circumstances and people's eligible needs which evolve overtime and might require different support solutions at different stages of life.
- To meet identified need people are using a range of community-based services including support in their homes, day opportunities, Shared Lives and other community settings; this aligns with the council strategy to support people earlier and closer to their home
- There is a need for residential respite for people with complex needs however the size of the current provision is larger than the current demand.

More detail can be found in Annex 1.

Working Group

3.2 A working group was established at the start of the review process. The purpose of this group is to develop options for residential respite for people with complex support needs beyond 2025. The group is attended by Suzanne Westhead, Director Adult Social Care, two commissioners and four family representatives. Papers and minutes from the working group are circulated to all families who use Newton House. There have been 3 meetings to date through March, April and May.

3.3 The first meeting focused on respite care in B&NES, discussing various aspects of adult social care, difficulties in accessing respite services, especially during the pandemic, and the complexities involved in care arrangements for individuals with complex health needs. Carers shared their experiences and highlighted the importance of communication and collaboration among stakeholders to improve care for individuals with complex needs.

- 3.4 The group also began to explore options for future residential respite services for individuals with complex needs, including continuing current services, council-run options, and tendering for new services, all while stressing the need for thorough needs analysis and flexibility in care provision.
- 3.5 The key findings from the needs analysis were shared with the working group at the meeting on 10th May and the Options Appraisal was presented to the group on 27th May.

Option Appraisal for building based respite

- 3.6 The findings of the needs analysis and feedback from representatives of the families has helped shape the options appraisal.
- 3.7 The options appraisal focuses on residential respite for adults of working age with complex needs. The objective is to have a building-based respite service that supports people with complex needs locally in B&NES.
- 3.8 The criteria for selecting preferred option are as follows:
- Minimise disruption to families and the people using the service – This means maintaining continuity of care or support during transition and ensuring that any change does not negatively impact access, quality or outcome for people and their families.
 - Offer flexibility – This looks to ensure that there is flexibility around the service and its delivery model to adapt and meet the needs of families.
 - Align with policy and best practice – This involves adhering to national and local regulations and statutory requirements and incorporating evidence based approaches and learning from other areas.
 - Offer best value for money demonstrating that the resources are used efficiently to deliver high quality outcomes.
 - Provide sufficient time to implement required changes and put new arrangements in place.
- 3.9 The following three options were co-designed with the representatives from the families who attended several meetings with commissioners and the Director of Adult Social Care:

Option 1 - Dimensions continue to run a respite service at Newton House post January 2026.

Option 2 - The Council run a respite service within one of the council buildings as the landlord and the provider.

Option 3 - Go out to tender for a new respite service from the external market.

A more detailed summary of the options appraisal can be found in Annex 2.

Emerging preferred option

- 3.10 The emerging preferred option of the working group, as a collective is Option 1 followed by Option 3. This way forward seeks to continue close working with the provider to enable Newton House to remain available to families until October

2026 when the contract is due to expire. This aligns the redevelopment of the residential respite offer for adults with complex needs with the broader strategic recommissioning of the learning disability offer across B&NES. This will also include the recommissioning of other learning disability services including day services, supported living, and care homes.

- 3.11 Dimensions as the provider and the landlord is supportive of the preferred options and we are proactively working through the details to finalise these arrangements. Dimensions have expanded their business offer more widely and have had additional interest from other purchasers enabling the service to be more sustainable.
- 3.12 We continue to engage in discussions with neighbouring local authorities and regional and national networks to research best practice and understand what works well in ensuring sustainability and flexibility of respite care.
- 3.13 The comprehensive review of the *Age Well* programme is ongoing. As part of this process, we are working to integrate all strands of the Respite Review into a single, cohesive framework

Newton House Update

- 3.14 Newton House continues to provide building-based respite for individuals with complex needs. Bookings for 2025 are open and families are taking them up.
- 3.15 All people currently using the service have had a reassessment or review. Several families whose needs and circumstances have changed overtime are being supported by social care practitioners to move to other long-term options. Shared Lives is being considered as an alternative day time or overnight support option by some families. Other families continue to book stays in Newton House for building based respite.
- 3.16 An operational group, which includes brokerage colleagues is in place to jointly review the assessed needs of each person affected and to identify suitable service provision.
- 3.17 A families meeting will take place week commencing 7th July for all families who use Newton House to update them on the latest position and next steps.

Next Steps

- 3.18 Dimensions has agreed costings for 2025/26 financial year. We are finalising the preferred option with the provider utilising contractual provisions in place.
- 3.19 The strategic recommissioning of the learning disability offer across B&NES will start later this year and this will include going out to tender for a building-based respite service for people with complex needs.

4 STATUTORY CONSIDERATIONS

- 4.1 Local authorities have a statutory duty to provide respite care, also known as short breaks, to children with disabilities or special needs. This requirement is primarily outlined in the Children Act 1989 and further detailed in the Breaks for Carers of Disabled Children Regulations 2011.

4.2 Key requirements include:

- Assessment and Eligibility: Local authorities must assess the needs of the child and their family to determine the appropriate level of support. The assessment should be holistic, considering the child's physical, emotional, and social needs, as well as the impact on the family.
- Service Provision: Services provided can include day care, overnight care, and support within the home or in other settings. The aim is to provide flexible and responsive support that meets the individual needs of the child and their family. This includes ensuring that services are accessible, culturally appropriate, and tailored to the specific needs of the child and family.
- Promotion of Welfare: The services provided should promote the welfare of the child and support the family in their caring role.

4.3 The Care Act 2014 outlines the responsibilities of local authorities in providing respite care for adults aged 18-100+.

4.4 Key requirements include:

- Assessment of Needs: Local authorities must assess the needs of adults who may require care and support, including their carers. This assessment determines the level and type of respite care needed.
- Duty to Meet Needs: If the assessment identifies eligible needs, the local authority has a duty to meet those needs. This can include providing respite care services such as day care, overnight care, and support within the home.
- Promoting Wellbeing: The Care Act emphasises promoting the wellbeing of individuals receiving care and their carers. This includes considering physical, mental, and emotional wellbeing.
- Support for Carers: The Act also recognises the importance of supporting carers, ensuring they have breaks from their caring responsibilities to maintain their own health and wellbeing.

4.5 Review of respite care described in this report is being undertaken under these legal frameworks with due regard to the key statutory requirements.

5 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

5.1 Respite care for B&NES residents is being funded by childrens social care and adult social care budgets. These budgets are subject to the council's service and resource planning process conducted annually.

5.2 Resource implications of providing respite care will be explored and considered at the gaps analysis and options appraisal stages of the review.

6 RISK MANAGEMENT

6.1 A risk assessment related to the issue will be undertaken during all stages of the review in compliance with the Council's decision making risk management guidance.

7 EQUALITIES

- 7.1 An equalities impact assessment is being developed informed by the information generated by the review to date. The service is very aware of the importance of delivering equitable services to all those people who have drawn on care and support and their carers.

8 CLIMATE CHANGE

- 8.1 At this stage of the review, it is too early to say what impact future models of respite care delivery might have on climate change.

9 OTHER OPTIONS CONSIDERED

- 9.1 Conducting a strategic review of services required to meet residents' needs forms part of the commissioning cycle of analyse-plan-do-review. Options for future models of delivering respite care will be developed and considered during the later stages of the review.

10 CONSULTATION

- 10.1 The review will be informed by feedback and insights from individuals using respite care and carers, social care practitioners, providers and other stakeholders. Engagement and communications plans are being developed and will be updated to reflect requirements at each stage of the review. Focus will be on seeking to develop deep understanding of what good respite care looks like, what works well and what could be improved, what is missing and then using this information and insight to co-design and develop flexible and resilient delivery models.

Contact person	Natalia Lachkou, Assistant Director of Commissioning and Claire Hannan, Live Well Commissioning Manager
Background papers	
Please contact the report author if you need to access this report in an alternative format	

FACT SHEET – SERVICE DESCRIPTION AND DRAFT ANALYSIS OF SERVICE USE IN 2024-25**Start Well**

Service Name	Service Description
Befriending Service	One to one relationship that enables a child or young person to access a range of community or leisure activities.
Beaumonts (building based)	This is a 5 bedded service which provides short breaks over 4 nights of the week. There are 2 accessible rooms. The service provides support to the most complex young people.
Targeted term time provision and Targeted holiday provision	School holiday and term time, evening or weekend, schemes where activities will be child-centred and focused on disabled children and young people having fun, relaxing, playing and socialising with peers in age appropriate groups with flexibility according to their developmental stage and support needs of the individual child.
Family Link	This service currently has a small number of families who provide respite service within their own homes. The needs of the individuals tend to be less complex.
Direct Payments	These can be used to fund a personal assistant to support outside of the family home. This tends to be used more regularly when other respite services are not available or cannot meet needs.
Fostering Families	Provides support to families, can be used to support parents, provide overnight care and as seen as a 'grandparent' type relationship.
Specialist agency provision	Provides support for the young person away from the family. This can be in the form of community visits or support in the family home.
Self-funded short break opportunities	There are several volunteer groups and activities which can be accessed by the individual and their families.

Service use in 2024-25

Service	Number of people using service for respite	Capacity used
Befriending Service	84	tbc
Beaumonts (building based)	30	tbc

	This is a commissioned service to meet statutory short break requirement.	
Targeted holiday provision	103	100%
Direct Payments	95 Families independently organise this care, including care to meet need for respite.	N/A
Family Link	The decline in Family Link offer reflects broader, systemic challenges in workforce recruitment and retention—barriers that are not unique to our locality but are echoed nationally.	
Targeted term time		
Fostering Families		
Specialist agency provision		
Self-funded short break opportunities		

Additional information:

- **Short breaks for disabled children:** While there is a sufficient variety of short break services available, capacity is often fully utilised, leading to use of expensive agency staff to cover respite needs. Start Well are currently commissioning a new service to decrease the need to use agency staff.
- **Other short breaks services** provided by BAPP daytime through most school holidays, by BAPP & WECIL at weekends during school term time.

Live Well

Service Name	Service Description
Newton House	This is a 5-bed building based service for people with learning disabilities and complex support needs.
Base House	This is a 3-bed building based service for people with learning disabilities with a focus on developing independent living skills.
Shared Lives	Support for people in the homes of approved families and individuals within the local community. This includes overnight respite support where this has been identified as required.
Day services	There are several providers delivering a range of accommodation and community-based day opportunities providing meaningful activities and opportunity to develop new skills.
Community Support	1:1 support to people in their family home or the community delivered by a range of support providers.

Data as of 31st March 2025

Service	Number of people using service for respite	Capacity used
Newton House	17	60%
Base House	15	74%
Shared Lives	24	N/A
Day Services	<i>Unable to determine as services also meet other needs</i>	157 people
Community Support	<i>Unable to determine as services also meet other needs</i>	N/A
Home Support	<i>Unable to determine as services also meet other needs</i>	21 people
Direct Payments	<i>Unable to determine as services also meet other needs</i>	94 people

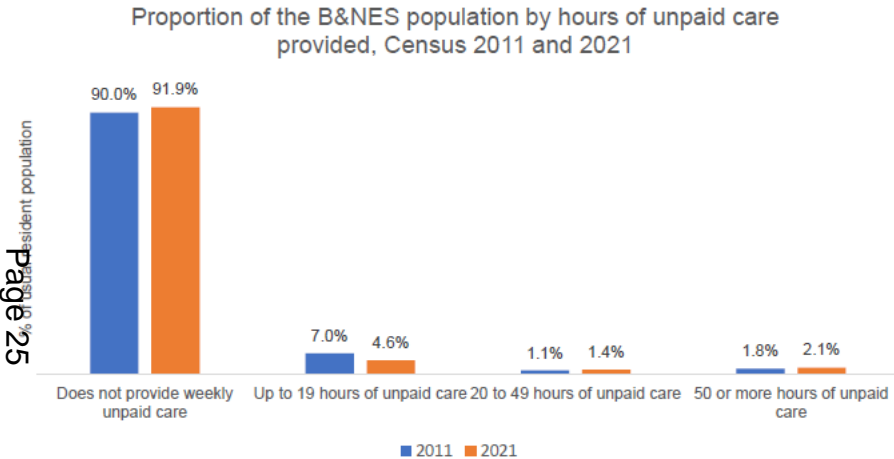
Additional information:

- **Shared Lives Services** are flexible and capacity can increase based on demand. This adaptability allows for a responsive approach to meeting the needs of individuals requiring respite care.

- **Building-Based Services**, such as Newton House and Base House, operate with a fixed capacity. Once this capacity is reached, it cannot be expanded. This limitation necessitates careful planning and management to ensure optimal utilisation of available resources.
- **Community and Day Services:** While these services are known to be used for respite care, it is difficult to separate when they meet the needs of the carer (as a respite) and/or the needs of the cared for person; often they do both.
- **People with support needs living at home:** We know that there are 147 individuals with learning disability and/or autism related support needs living at home. We are analysing this information to better understand their circumstances and which services are meeting their needs, including respite for carers where applicable.

Unpaid Care

Back to Section Contents



- In the 2021 census, **8.1%** of the usual resident population of B&NES reported providing **unpaid care**, an overall **decrease** from 2011 (9.9%).
- The largest decrease was seen in those providing up to 19 hours of unpaid care per week, down from 7.0% in 2011 to 4.6% in 2021.
- A slight increase was recorded in those providing 50 or more hours of unpaid care per week at 2.1%, up from 1.8% in 2011.
- **6,485** usual B&NES residents report providing 9 hours or less of unpaid care per week in 2021, representing **43%** of all unpaid care provision reported in B&NES.

Data Notes:

- Census 2021 was undertaken during the coronavirus (COVID-19) pandemic. This may have influenced how people perceived and managed their provision of unpaid care, and therefore may have affected how people chose to respond.
- Caution should be taken when making comparisons between 2011 and 2021 because of changes in question wording and response options.
- Census 2021 question text asked: “Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems relating to old age? (Exclude anything you do as part of your paid employment)”.

Unpaid care	B&NES (2021)
Provides no unpaid care	169,418
Provides 9 hours or less unpaid care a week	6,485
Provides 10 to 19 hours unpaid care a week	2,085
Provides 20 to 34 hours unpaid care a week	1,282
Provides 35 to 49 hours unpaid care a week	1,269
Provides 50 or more hours unpaid care a week	3,849
Total	184,388

Sources:

1. ONS Unpaid Care Census 2021 Local Authority dataset <https://www.ons.gov.uk/releases/healthdisabilityandunpaidcarecensus2021inenglandandwales>

2. ONS NOMIS Unpaid Care Census 2011 dataset <https://www.nomisweb.co.uk/census/2011/ks301uk>

Annex 2 Options Appraisal

Objective – To have a building-based respite service that supports people with complex needs.

Criteria for selecting preferred option –

1. Minimise disruption to families and the people using the service
2. Offer flexibility
3. Align with policy and best practice
4. Offer best value for money
5. Provide sufficient time to implement

	Advantage	Disadvantage	Risks
<p>Option 1:</p> <p>Dimensions continue to provide a respite service from January 2026 – October 2026 under the current contractual arrangements</p>	<p>People can stay in a place they already know and trust.</p> <p>Staff are experienced and understand the needs of the people they support.</p> <p>No changes or moves needed for families or individuals.</p> <p>No need for capital investment or transition planning</p> <p>Strategic Alignment - Current contract end date aligns with the broader recommissioning of learning disability services in B&NES in 2026. This could be more attractive to the market and offer opportunities for innovation in care delivery and economies of scale.</p>	<p>Fewer people are using the service now, and that number is expected to decrease as people move on to long term placements.</p> <p>It's expensive to run a big building that isn't full.</p> <p>If there are not enough people using the service, it might have to close in the future.</p>	<p>Financial sustainability of the service if demand continues to decline unless capacity is commissioned by neighbouring authorities</p> <p>Potential for service closure before the end of the contract in October 2026.</p>

<p>Option 2:</p> <p>The Council run the service within one of the council buildings as the landlord and the Provider</p> <p>Page 27</p>	<p>The council would have full control over how the service is run.</p> <p>It could be easier to link with other local services and activities, for example by co-location respite service with a day service.</p> <p>Emergency respite could be more available.</p> <p>Access to activities and sessions in adjoining buildings/services.</p> <p>Service specification can be tailored to current and future needs.</p>	<p>Would require capital investment to adapt a building.</p> <p>Timeline for any building works and adaptations could be longer – this may not be in place for January 2026.</p> <p>Council would need to recruit and manage staff.</p> <p>Service is likely to cost more due to using Council terms and conditions.</p> <p>People might have to attend a specific day service during the week to allow respite stays to work.</p> <p>May not be able to provide a flexible enough service offer to ensure a sustainable service.</p> <p>Families and individuals may need to adjust to a new team and a new location.</p>	<p>Risk of replicating underutilisation issues if service is too large.</p> <p>Potential staffing challenges including TUPE processes.</p>
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<p>Option 3:</p> <p>Engage with the local market and go out to tender for a new respite service</p> <p>Page 28</p>	<p>Engaging with the market supports the opportunity to attract a mix of local providers including voluntary sector and social enterprises.</p> <p>Opportunity for innovation in care delivery.</p> <p>Potential for better value through competitive tendering.</p> <p>Service specification can be tailored to current and future needs.</p> <p>Aligns with strategic intention to recommission the wider learning disability services in October 2026.</p> <p>Supports the delivery of B&NES Procurement Strategy.</p>	<p>Long lead in time to procure and mobilise a new service with additional time required to modify a building means that this option is unlikely to be achievable by January 2026.</p> <p>Families and individuals may need to adjust to a new team and a new location.</p> <p>Few providers may be interested due to low demand if the opportunity is presented in isolation.</p>	<p>No one tenders for the opportunity.</p> <p>Risk of higher costs.</p> <p>TUPE implications for any new provider.</p>
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Bath & North East Somerset Council			
MEETING	Children’s and Adults Health and Wellbeing Policy Development and Scrutiny Panel		
MEETING DATE:	16th June 2025	EXECUTIVE FORWARD PLAN REFERENCE:	
TITLE:	Carers Strategy Update		
WARD:	All		
AN OPEN PUBLIC ITEM			
List of attachments to this report: N/A			

1 THE ISSUE

- 1.1 Carers (also referred to as unpaid carers) are defined as those who have caring responsibilities for another person, often a family member or friend. In this instance we are specifically addressing adults who provide care to other adults.
- 1.2 In 2024 B&NES Council embarked on an innovative project to co-produce a Carers Strategy with carers in B&NES. During this process carers outlined what they felt worked and didn't work for them regarding being a carer in B&NES. They also set out their key priority areas for change. This culminated in a Carers Strategy, launched in September 2024. The completed Carers Strategy was well received by carers and received a favourable mention in the B&NES Care Quality Commission Local Authority Assessment Report. The report also noted that carers are keen to see 'what happens next' with this work.
- 1.3 This report outlines progress towards the carers strategy activity plan, which has developed since the last update to scrutiny. It is prescient that this report is being delivered the week after National Carers Week, where the theme 'caring about equality' is central to our work.

2 RECOMMENDATION

The Panel is asked to;

- 2.1 Consider content of the report and provide comments.

3 THE REPORT

Co-produced Activity Plan

- 3.1 During development of the Carers Strategy it was agreed by carers that an activity plan was required, to turn the objectives of the strategy into tangible actions. This document was drafted by the Carer Working Group, and taken to social care senior managers for comment in January 2025. Elements of the activity plan, including a focus on ensuring ease of access to information and a clear process for statutory carers assessments, were subsequently included in the Adult Social Care Improvement Plan.
- 3.2 The remaining elements of the activity plan, particularly improving carer awareness, connecting carer related services, and ensuring an effective crisis response, require systemwide response and therefore are being considered and aligned with local and regional activities. We expect to publish the activity plan as an addition to the Carers Strategy in Summer 2025.

Progress on Delivery

- 3.3 Assessments and reviews – The Adult Social Care operations team are conducting significant activity to reduce waiting lists for assessments, including carers assessments. 30 Carers assessments have been conducted between January and May 2025, a 20% increase on the same period in 2024. There are currently 1295 Carers supported by B&NES, an increase of 445 since May 2024.
- 3.4 Carers Support Service Procurement – Carers have been directly engaged in the process of recommissioning the Carers Support Service. In Spring 2025 carers met to discuss what they thought key elements of the service should be. This content was then included in the service specification. Carers will be an integral part of the tendering process. Carers have met to consider and amend quality questions required for the tender and will take part in evaluation as part of the tendering team.
- 3.5 Carers Online Portal – As part of improvements to information and advice, referrals and assessments, B&NES has been developing online portals, which bring these elements together in one online space for residents to access. B&NES worked with the Carers Centre to develop the carers portal, including information available and use of terminology. Carers have been invited to provide feedback on this work, and support development of some elements. The first meeting of the group will be in July 2025, with a second meeting scheduled for August.
- 3.6 Transitions to Adult Social Care - The Parent Carer Forum has been engaged as part of the development and launch of the transitions portal for young people potentially moving from children's to adult social care. The transitions portal was launched in November 2025. Any young carer approaching the age of 18 can be referred/self-refer to the transitions team for an Adults Carer Assessment.

3.7 Community Wellbeing Hub – During 2024 and 2025 Riviam, the digital partner for the Community Wellbeing Hub, has been delivering carer related improvement work funded through the Accelerating Reform Fund. Through better data capture it is now easier to track the number of carers engaging with the hub. This data will help to build a clearer picture of carers in B&NES and help to better refer carers to third sector and statutory support. Additionally, in person engagement with residents at the Royal United Hospitals is supporting B&NES ability to engage carers at an earlier stage.

3.8 National and Regional Links – The Assistant Director for Operations has taken on the role of chair for the carer subgroup of South West ADASS. As this group reforms, it will provide opportunities to learn from other local authorities and shape regional activity. The Programme Manager for Transformation is engaged with partners in B&NES, Swindon and Wiltshire to scope opportunities for joint activity and shared learning.

4 STATUTORY CONSIDERATIONS

4.1 According to the Care Act 2014, local authorities, and by extension, social care teams must fulfil the following duties that directly impact carers:

- To focus on promoting wellbeing
- To prevent, reduce and delay need for support, including the needs of carers
- A right to a carer's assessment based on the appearance of need
- A right for carers eligible needs to be met
- To provide information and advice to carers in relation to their caring role and their own needs

4.2 The act also places a duty on NHS bodies (NHS England, ICB's, NHS Trusts and NHS Foundation Trusts) to co-operate with local authorities in delivering the Care Act functions.

5 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

5.1 All co-production activity related to carers is funded through an allocation of Better Care Funding assigned for the purpose.

5.2 The Project and Programme Manager (Transformation) is allocated to deliver carer related co-production activity. Additional staff resource has been allocated from the IT team for the development of the carers portal.

6 RISK MANAGEMENT

6.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision-making risk management guidance.

7 EQUALITIES

7.1 An Equality Impact Assessment will be conducted for each element of the activity outlined in the activity plan.

8 CLIMATE CHANGE

8.1 There are no climate implications for the outlined activity.

9 OTHER OPTIONS CONSIDERED

9.1 Previously, the Carers Strategy has been delivered without consultation with carers. This option was considered and disregarded, with the expectation that co-production will lead to better outcomes.

10 CONSULTATION

10.1 The carers strategy and activity plan have been developed as co-produced activity with carers. Subsequent activity, resulting from the strategy and plan ranges from engagement through to co-production.

Contact person	Callum Graham Robertson, Commissioning Project and Programme Manager
Background papers	Carers Strategy - https://www.bathnes.gov.uk/sites/default/files/BNES%20Carers%20Strategy%202024.pdf
Please contact the report author if you need to access this report in an alternative format	



OHID 22.05.25



The Active Way is...

- Promoting social prescribing into a range of **active travel** activities
- Offering a **broad cycling, walking and wheeling offer** with interventions for all age groups and needs.
- Building people's **confidence, motivation, knowledge and skills** to engage with walking and cycling activities long-term.
- Evaluating any **positive outcomes** we find in relation to **improved health and wellbeing**, any correlation to **reduced GP and Hospital visits from participants** and any increases in the **use of local infrastructure** (cycle paths, use of parks and walking routes).



Interventions



Walking

- Active Steps
- 1-2-1 Wellbeing walks
- Snap and stroll
- Buggy Walks
- Nordic Walking
- Go Jauntly localized route creation



Page 35

Hybrid (Walking, wheeling and cycling)

- KiActiv Digital physical activity data dashboard
- Willson Grant (community asset building)
- Seated exercise / strength building
- Beat the Street (mass community activity)



Cycling

- Beginner and returning cyclist group rides
- Adult 1:1 cycle training in safe (off-road) spaces
- Inclusive cycling (using adapted bikes)
- Bikeability & Balanceability
- Bike and e-bike hire
- Wellbeing side by side ebike taxi (Chat E Cycle)
- Dr Bike and DIY bike maintenance
- Bike reuse
- E-Cargo Bike and Trailor Hire



Infrastructure

- Some improvements to existing infrastructure
- Route planning
- Wayfinding and Interpretation boards



Who the Active Way is for



There is something for everyone, we want to be as inclusive as possible and are unlikely to turn anyone away, but we are targeting based on need and inequality;

- People living in deprived areas with low levels of physical activity
- People with long term conditions
- Underrepresented groups
- People with Multiple morbidity
- People with disabilities
- People suffering from anxiety and lack of confidence
- People not in education, training or (well paid) employment
- Ethnic minority groups (Global Majority)

Page 36



We are offering activities to communities across the Somer Valley and Bath & North East Somerset based on need.

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Referral opportunities

Working with the Three Valleys PCN

Social Prescribing Link Workers

At the start of the pilot there were 5 link workers in our targeted PCN

Care Coordinators

Each GP Practice has a Care Coordinator

PCN Health and Wellbeing Coach

The PCN now employ a Health and Wellbeing Coach to work across all 7 practices

Community Wellbeing Hub

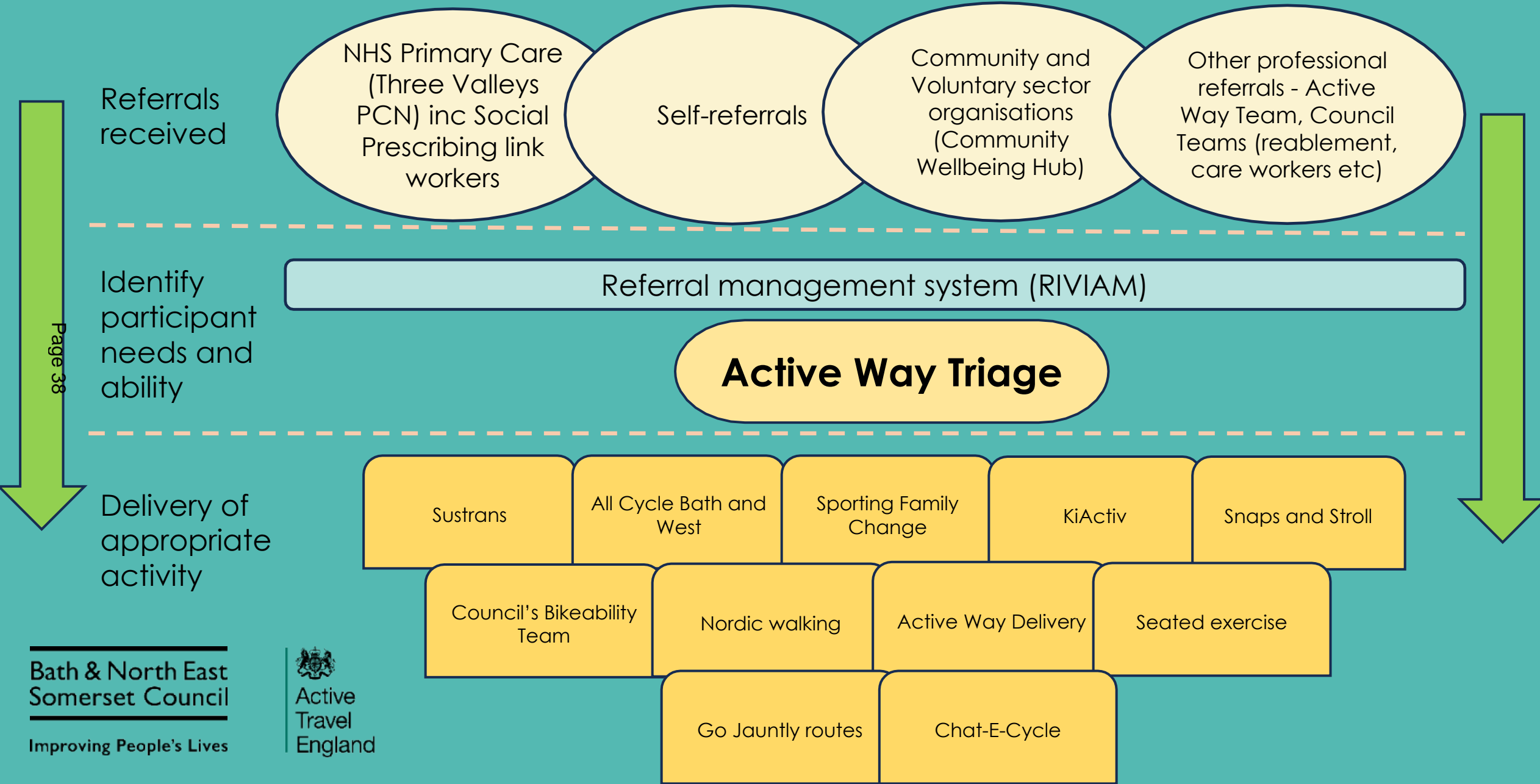
A partnership organisation with over 40 Third Sectors Organisations and Charities and local services brought together to deliver services effectively.

Community Groups

We have a range of community groups we have proactively engaged with to offer activities



Active Way System



Engagement so far

Total active referrals
(without BTS)

1800

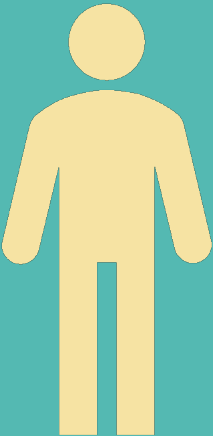
Total active participation
(Inc BTS)

5782

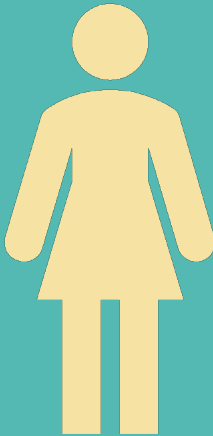
Average take up rate

89%
range 52 - 210%

Gender



37%

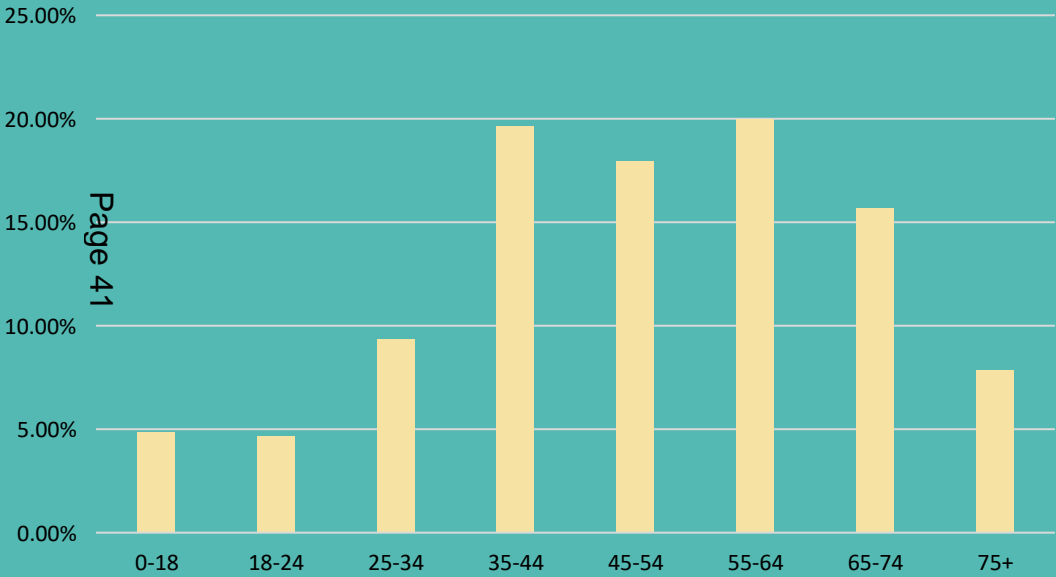


61%

2% prefer not to say

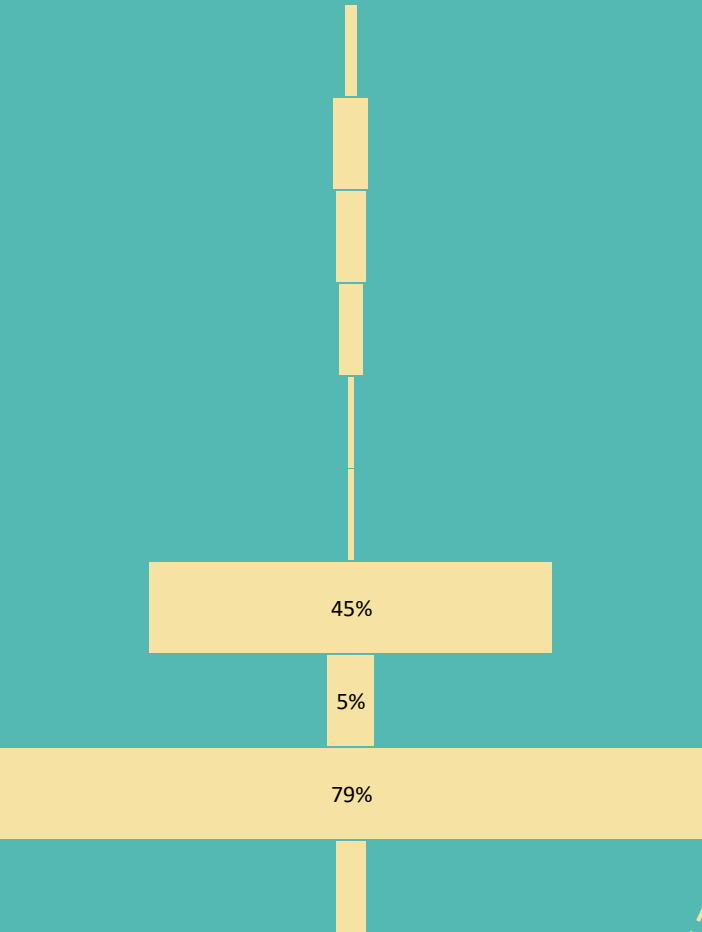
Engagement so far

Age range of referred participants



Demographics

- Asian or Asian British (Any other Asian Background)
- Asian or Asian British (Indian)
- Mixed - Any other Mixed background
- Mixed - White and Asian
- Mixed - White and Black African
- Mixed - White and Black Caribbean
- Not Stated
- White - Any other White background
- White - British
- White - Irish



Outcomes (qualitative and quantitative)



Improved health and wellbeing



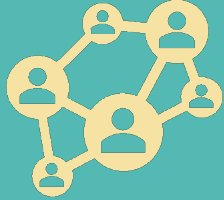
Increases in physical activity levels



Greater awareness of local area, cycling and walking routes



Widescale engagement with stakeholders



Social Connections and improved life outcomes (employability, confidence and skills)



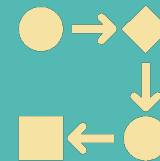
Provided skills and resources to local charities and organisations to sustain active travel



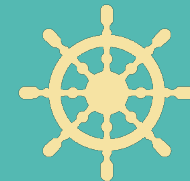
Investment in local economy



Successful targeted approach to those with the most need



Developed robust systems and processes



Leading the way in ATSP

Stef took a e-bike on loan for a month. Within a few days she was reporting back about her experiences;

“....the e-bike made cycling home up big hills possible, which I couldn’t manage on a regular bike since knee surgery.

The first few days, I felt wobbly and unsure about gears..... But after a few days, I mastered it and felt confident navigating potholes and even horse poo! Each day at around 3 pm, I’d start thinking about the ride home, feeling tired and wishing for my car. But by 6 pm, I’d change and hop on the bike, and within minutes, I was so glad to be cycling.”

What was next for Stef?

Page 43
“I am a convert! I have enjoyed cycling each day and have ordered myself an e-bike. Realistically, I can only commute on it two days a week due to other commitments, but I’ll eagerly anticipate those days and more weekend adventures!”

Stef went on to buy a new e-bike from a local supplier, supporting the local economy. By replacing her 6km commute by car for 2 days per week equates to approx. 54km per month. The average emissions of this is 8.5kg of CO2 saved through an Active Way intervention*.

**Based on 164g of CO2 per Km average vehicle emissions from Statista.com*



“

Snap & Stroll facilitator

“A participant came with no confidence and struggled to speak, we were told. We helped with a CV, and they now have a responsible job. Another is doing a training course; I don't think that's bad for our little group.”

Adrian Wyatt, Snap & Stroll Facilitator



“

Active Steps participant

“I just really wanted to say how different your group is. It provides me with the ability to exercise increasing serotonin which in my position is a really hard thing to do. You are completely empathetic and extremely non-judgmental. With your leadership the whole group is very welcoming.”



“

Bike Maintenance participant

“I gained confidence and new skills in how to check a bicycle to ensure it is road-worthy and maintained correctly. Excellent session.”



“

Snap & Stroll participant

“Just want to thank everyone for last year and start off this year it's been amazing; this groups have given me more confidence and a social life.”



“

Seated Dance participant

"I want to say a big thank you...I really look forward to Wednesday afternoon. You are both kind and patient. The sessions have been fun and helped with my movement and mental health. Attending these sessions has also given me the confidence to try other things with The Active Way."



“

Beat the Street participant

"It made me more determined to go walking during my lunch break even if it was raining."

Female, 50s



Quote from **Sustrans**:

"I think the people that we are currently taking out are very, very enthusiastic. They're definitely moving more. We've got one person in particular who is loving it. [...] I'm thinking of one chap who comes along and he sings his way through Beatles songs every time we go out."



Whats next?



- More proactive engagements with groups, more referrers and organisations
- Continue to build the profile and visibility of The Active Way in the Somer Valley and create demand outside of it
- Evidence outcomes
- Breakdown more barriers to access for Active Travel and build a solid legacy

Page 48



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Thank you



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Page 49

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BATH AND NORTH EAST SOMERSET

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

Monday 12th May 2025

Present:- Councillors Dine Romero (Chair), Liz Hardman (Vice-Chair), Paul Crossley, David Harding, Ruth Malloy, Lesley Mansell, Joanna Wright, Onkar Saini and Michael Auton (in place of Bharat Pankhania)

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

Cabinet Member for Children's Services: Councillor Paul May

Also in attendance: Christopher Wilford (Interim Director of Children's Services), Laura Ambler (Place Director, B&NES, BSW Integrated Care Board), Carla Cooper (Head of Young People's Prevention Services), Laura Donnelly (Head of SEND), Olwyn Donnelly (Head of Education Commissioning) and Philip Frankland (Strategic Planning & Performance Manager)

108 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

109 EMERGENCY EVACUATION PROCEDURE

The Chair drew attention to the emergency evacuation procedure.

110 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

Councillor Bharat Pankhania had sent his apologies to the Panel, Councillor Michael Auton was present as his substitute for the duration of the meeting.

111 DECLARATIONS OF INTEREST

There were none.

112 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIRMAN

The Chair informed the Panel that the first meeting of the Early Help Task Group had been held and that they would be updated as work progresses.

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

Naomi Trentham, Mitos Global addressed the Panel on the subject of the benefits of collaborative working, whole life approach and early intervention for vulnerable children and families. A copy of the statement can be found as an online appendix to these minutes and a summary is set out below.

'Mitos Global is an organisation that provides training, coaching and intervention for all ages and stages, though at the moment our provision is mainly given to children between years five to eleven.

Our offering includes Emotion Coaching, speech & language therapy, sensory assessments & profiling, vocational support, neurodiversity support, and currently 12 hours per week of Alternative Education for three vulnerable students.

We operate privately direct to families, as a service through schools and as a direct provider to the Local Authority. We serve over sixty children and young people every week, from group work in schools to 1:1 therapeutic coaching for children with complex needs. We have a number on our current caseload who are either adopted or in foster care.

Where possible, we work with the whole family.'

She gave a number of examples of the complicated caseloads they have and how these have benefited from being looked at from a viewpoint of the whole family, and not solely through education based solutions.

She highlighted the need for support to be also provided for parents and carers.

She asked the Panel to 'Imagine if all the professionals involved could work together and look at the whole family, instead of each child? If the funding was pooled and the provision broadened?

She added that 'We recognise there are many excellent providers in B&NES and incredible LA staff on the ground – how are we different?

We work collaboratively with families, schools and other agencies, taking a whole child/whole life approach, and then we stay for as long as we can or as long as we are needed, we don't stop when a goal has been reached, we stop when we're no longer needed. We seek to build healthy relationships with our clients, fostering trust and connection, which we believe lies at the heart of any long term success.

Early intervention for children is better than intervention when in crisis, of course, but we believe meaningful and sustainable impact will only come when there is a focus on the whole family.'

Councillor Liz Hardman asked what funding the organisation receives.

Naomi Trentham replied that this was through a number of different means, privately, via schools and the Local Authority. She said that any revenue that is achieved

through the training and development they deliver to schools and organisations is fed straight back into overall provision for clients.

Councillor Hardman asked who should lead on helping to ensure that there are more joined up services.

Naomi Trentham replied that she did not have a direct view on that, but acknowledged that it was important for children to be attending school and a focus on their wellbeing. She stated that she felt that a single practitioner for a child / family would be best placed to join up the dots.

Councillor Lesley Mansell asked if any data was available on the long-term impact for families in receipt of their services.

Naomi Trentham replied that they were looking into whether the University could assist with a data analysis project. She added that they have worked with a mum for the past two years, one of her daughters is now taking her exams and able to self-regulate and her younger sister is now in receipt of support also.

Kevin Burnett asked how they were contacted to begin working with individuals / families.

Naomi Trentham replied that she had a good working relationship with most schools in the area and that referrals would be made via the school SENCO (Special Educational Needs Coordinator). She added that she had also made personal connections with local groups and organisations over the years.

The Chair said that she was minded to invite her to a future meeting of the Early Help Task Group so that she could share additional information with them.

Naomi Trentham replied that she would be willing to attend and support this work area as much as possible.

The Chair thanked her for her attendance on behalf of the Panel.

114 MINUTES: 14TH APRIL 2025

The Panel confirmed the minutes of the previous meeting as a true record and they were duly signed by the Chair.

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

Laura Ambler, Director of Place for Bath and North East Somerset, BSW ICB addressed the Panel and highlighted the following areas from within the update.

Update on Covid-19 spring booster vaccinations

All adults aged 75 and over, as well as those over the age of six months and living with a weakened immune system, are eligible for the free vaccination.

So far, since the vaccination drive began at the beginning of April, approximately 45 per cent of people eligible for a booster and living in Bath and North East Somerset, Swindon and Wiltshire have received their top-up vaccine.

For Bath and North East Somerset alone, the uptake currently stands at around 46 per cent, which is similar to what is being seen in Swindon and Wiltshire, and above the national average, which is approximately 36 per cent.

Vaccination appointments are still available and can be arranged either over the phone by calling 119 or online at www.nhs.uk/bookcovid .

Update on responses to the ICB's Big A&E Survey

The Big A&E Survey went live in April and has, to date, been completed by 822 people.

The ICB is now working with Healthwatch to complete face-to-face surveys in each of the A&E departments throughout May, June and July.

Results will be used to develop a better understanding of what has driven walk-in visits to A&Es, and why people are visiting hospital rather than using other NHS services, such as GP surgeries, minor injury units or NHS 111.

The survey will run until the end of July, and a further update will be offered once results have been analysed.

Early data from the online survey has shown:

- 81 per cent agreed that they didn't have any other choice of where to seek treatment but A&E, while 65 per cent said they went to A&E as they felt their condition was serious or life threatening
- 79 per cent of respondents did not think they should have attended somewhere else other than A&E
- Most people visiting A&E travelled from within a five-mile radius

Drop-in sessions planned for people to find out more about new Trowbridge Integrated Care Centre

Opportunities to find out more about the new and exciting Trowbridge Integrated Care Centre will be happening at community locations throughout the spring and summer months.

Representatives from the local NHS will be on hand at drop-in sessions taking place in and around Trowbridge to provide residents with information about the new centre, which is currently being built on land opposite the town's existing community hospital.

The first drop-in session will be held on Friday 9 May at the Asda supermarket in the Shires shopping centre on Bythesea Road between 11am and 3pm.

Members of the public will be able to see images of the new centre, learn more about what services will be moving to the site and how the new facility will benefit Trowbridge and the surrounding areas.

There will also be opportunities to ask questions and share feedback.

Councillor David Harding asked how the Trowbridge Integrated Care Centre would be staffed.

Laura Ambler replied that there would be a transfer of services from Trowbridge Hospital and that the intention was to have multi-discipline teams on site.

Councillor Harding referred to the A&E Survey and asked if the responses were proportionate in respect of the numbers of people attending from within a five-mile radius, given the rural population of B&NES.

He also asked if similar surveys had been carried out in the past so that comparisons could be made.

Laura Ambler replied that she would feed those points back to colleagues and said that the five-mile radius figure was attributable to the 822 respondents to the survey.

Councillor Liz Hardman asked what the Trowbridge Integrated Care Centre was replacing and was one being planned within B&NES.

Laura Ambler replied that services were relocating into a modern facility that would enable co-location of services to be possible. She added that co-location options across BSW were being looked at and would be reliant on capital funding.

Councillor Hardman said that she felt it was important to analyse the location of all the respondents to the survey.

Laura Ambler replied that the data would be analysed in order to identify the drivers for attending.

Kevin Burnett referred to the Covid-19 spring booster vaccinations and asked if there was a target for the number of people they were trying to reach.

Laura Ambler replied that there wasn't a target figure, but a focus on specific cohorts.

Kevin Burnett asked what benefits the Trowbridge Integrated Care Centre has for the residents of B&NES.

Laura Ambler replied that B&NES residents would be able to access the centre through being part of the BSW footprint. She added she would provide a web link that would enable the Panel to view further information.

Councillor Joanna Wright asked if the current number of B&NES residents with Covid-19 was known, similarly the figures for those who have Measles, Mumps or Rubella (MMR).

Laura Ambler replied that she did not have to hand the hospital numbers for those with Covid-19 and said that it was not routinely reported on anymore across the local population. She said that she would consult colleagues with regard to the figures relating to MMR.

Councillor Lesley Mansell said that she would be interested to hear more information about the A&E Survey, especially in relation to equalities data.

Laura Ambler replied that the intention is to have the equality data from the survey as complete as possible.

Councillor Mansell asked if it was yet known of any planned changes in respect of the 50% cuts that were mentioned in a previous meeting of the Panel.

Laura Ambler replied that they hoped to be able to provide more of an update in June and reminded the Panel that this was in respect of a 50% reduction in running costs for the ICB and not related to contract(s) with HCRG or any other body.

Councillor Mansell asked why HCRG were not officially recognising any of the Trade Unions.

Laura Ambler replied that several meetings were held with Unions whilst the contract award was ongoing and added that HCRG were not in a position to recognise one single union as representative of all staff.

The Chair asked if having received 822 responses to the A&E Survey, how many people had actually attended A&E over this time period.

Laura Ambler replied that she would attempt to find out that information for the Panel.

The Chair asked if there was any update to be given regarding the Secretary of State for Health and Social Care to use their powers to call in the BSW ICB's proposed changes to community-based care in Bath and North East Somerset, Swindon and Wiltshire, particularly the appointment of HCRG Care Group, which was raised in March.

Laura Ambler replied that there was no update to be given at the present time.

The Chair, on behalf of the Panel, thanked Laura for attending and the BSW ICB for their update.

116 CABINET MEMBER UPDATE

Councillor Paul May, Cabinet Member for Children's Services addressed the Panel and highlighted the following points from his update.

He began by complimenting Councillor Joanna Wright for her work on the 'Tree of Hope' which was soon to be planted in Alice Park. He explained that children / young people were going to be asked to help name the tree.

Senior Manager changes in Children's Services

He thanked Chris Wilford for continuing to act as Interim Director of Children's Services following the retirement of Mary Kearney-Knowles last month.

He informed the Panel that Leigh Zywek, our Assistant Director of Children and Young People's Services had been successful in applying for a role in a neighbouring authority and would leave the Council in the middle of June. He said that Leigh has been a fantastic leader and thanked her for all her work.

Councillor Lesley Mansell referred to the Safety Valve update and asked how the delay is affecting the SEND work within the Council. She added that section 3.5 of the SEND Collaboration for BaNES (Safety Valve) – Equality Impact Assessment (EIA) had no actions listed against it.

The Interim Director of Children's Services replied that work continues, especially with regard to Early Help and the SEND & AP Advice Service. He said that fewer complaints were being received as a result of improvement of their timeliness of handling enquiries.

He said that a significant grant was still expected for the new Free Schools and that a full report would be shared with the Panel when available. He added that he would look into the point raised regarding the EIA.

The Chair asked if there was any indication of a timescale for a decision from the DfE.

Councillor May replied that they have been contacted both regionally and nationally and that there was no update at the present time. He said that the delay had the potential to cost the Council £4m a year.

Councillor Liz Hardman referred to subject of Families First and asked how much more funding was required if the £400k provided by the Department of Education to the local authority to implement these reforms falls short of the resources needed to implement all of the changes.

The Interim Director of Children's Services replied that there was no exact figure being sought and that work was ongoing through the children's transformation programme to ensure multi-disciplinary teams will be in place. He added that he expected the design phase of the work to begin in the next 3 – 6 months.

Councillor Hardman asked for any further information in relation to Early Years Entitlement.

Councillor May replied that the team were experiencing an enormous amount of pressure relating to this work at the present time.

The Strategic Planning & Performance Manager added that each provider will have its own separate running costs and that there was a range of discrepancies as to how they are funded. He added that the Local Government Ombudsman had made a

decision to say that providers can't mandate that parents / carers must pay for the hot meals offered and a choice must be given to families to provide their own alternative.

He stated that the final stage of the process would take place in September 2025 when the number of hours of care would expand to 30. He said that a phonenumber and website were now live for further enquiries.

Kevin Burnett asked if providers could decide on how many children they accept through their decision to purchase hot meals.

The Strategic Planning & Performance Manager replied that there were no conditions attached to the Entitlement and the expectation was that any family could apply.

Kevin Burnett asked if families that qualify for auto enrolment into Free School Meals would receive a letter to inform them. He also asked who had overall control of this process.

The Interim Director of Children's Services replied that the Welfare & Benefits team within the Council were overseeing this process and that there was no work anticipated for schools to carry out. He said he would seek an answer as to whether a letter would be issued.

Kevin Burnett asked when the next termly meeting with Ofsted was due to take place and what topics were normally discussed.

Councillor May replied that he did not attend these meetings, but believed that the next one was due to take place in June.

The Interim Director of Children's Services added that it was a fairly open agenda, but recent topics had included the School's Inspection Framework, SEND Reviews and any concerns regarding schools. He added that in addition there would also be a once a year conversation relating to Social Care.

Kevin Burnett asked if any information could be supplied with regard to funding to the Virtual School.

The Interim Director of Children's Services replied that this funding was normally received year on year and was not expecting it to cease.

Councillor Paul Crossley referred to the subject of Fostering Families and welcomed the work, but asked officers to be mindful of the definition of 'family' as that can take its form in differing structures.

Councillor May agreed and replied that they were supporting six families currently on a trial period to attempt to prevent the children from going into care. He added that the idea behind the project had come from within the Council and had received interest from the Chief Social Worker who had visited in order to find out more about it.

Councillor Joanna Wright referred to the issue of Early Years funding and said that she had been contacted by a local nursery to say that they felt under duress to sign the Early Years Entitlement agreement. She asked whether the Council should have waited for further guidance and if they had received any letters of concern.

The Strategic Planning & Performance Manager replied that the agreement was a template supplied by the DfE and that very few Local Authorities had made changes to it. He said that any correspondence received had been shared with the DfE. He informed the Panel that a meeting with providers was due to take place next month.

Councillor Wright asked if due care regarding safeguarding had been carried out in terms of allergies to food being brought into these settings if the hot meals provided are not being purchased.

The Strategic Planning & Performance Manager replied that updated guidance has been published regarding this and that officers and providers were aware of these safeguarding issues.

Councillor Michael Auton stated that a similar issue had been raised within his ward where a provider had only been given a short amount of time to sign the agreement. He asked what the Council was doing to provide support.

Councillor Wright asked the Cabinet Member for Children's Services to continue to provide information regarding this matter to the Panel when he receives it.

Councillor May replied that he was sympathetic to the providers as there was hardly any leeway in the process.

Councillor Ruth Malloy commented that she welcomed the offer to receive a newsletter from the West of England Music Alliance (WEMA).

The Interim Director of Children's Services replied that the newsletter was not ready to be released yet and that a representative from WEMA would welcome the opportunity to attend a future meeting of the Panel.

The Chair asked for it to be clarified as to how funding is received by the majority of education settings.

The Strategic Planning & Performance Manager replied that this was through the Dedicated Schools Grant (DSG) received from the DfE, and was based on an annual census / formula basis.

The Chair asked if this was top sliced for SEND.

The Strategic Planning & Performance Manager replied that this was from a different area of the DSG and the figure for this year had decreased to 94% from 95%.

Councillor May added that funding decisions are taken through the Schools Forum annually and that the national formula is applied.

The Chair asked if any comment could be given on the high level of fines that have been issued relating to unauthorised school absences.

The Interim Director of Children's Services replied that he was aware of the increase in fines and would seek comparative figures for the Panel.

The Chair raised the subject of the pending demolition of the former Culverhay site and said that former pupils / residents should be allowed to view the site before this takes place.

Councillor May acknowledged this and said that he had made a commitment to putting such an opportunity in place.

The Chair thanked Councillor May on behalf of the Panel for his update.

117 UPDATE REPORT - PLACEMENT OF YOUNG PEOPLE AT FOSSE WAY HOUSE RESIDENTIAL PROVISION

The Head of SEND introduced the report to the Panel and highlighted the following areas from within it.

- The Partnership Trust were informed earlier in the academic year that the Council were unlikely to need to commission places at Fosse Way House for the following year, starting in September 2025. She added that this was not due to budget pressures but because no new B&NES children have been identified whose Education Health and Care Plans indicate that they have specific educational needs requiring a curriculum outside of school hours, also known as a 24-hour curriculum or waking day curriculum.
- The Statutory SEND team reviewed the Education elements of plans (section F) for children and young people at Fosse Way house, and consideration was given as to whether this provision could be offered during the school day. In all cases, the provision could be incorporated into a day curriculum and so the residential element of the placement was not required to meet this educational need. It is that Council's view that independence skills can usually be taught during the school day, and through extracurricular activities, as they are at other special schools.
- Only pupils on roll at Fosse Way School are eligible to attend its residential provision and when a child is placed in Fosse Way House, it is with the clear understanding that it is for one academic year. The children currently placed there will be able to complete this year-long placement. The Local Authority have not received any requests for mediation to resolve disagreement or dispute, or requests for tribunal resolution from families following this decision.

Councillor Liz Hardman said that she found it difficult to understand why the service had to close and asked if the criteria for a placement had changed and how this would affect those pupils in lower age settings at Fosse Way School.

The Head of SEND replied that having reviewed the EHCPs, no child had been identified as needing this type of provision and that additional skills could be taught

to pupils during the day. She added she was confident that the needs of the children and young people of B&NES could still be met.

Councillor Hardman said that the provision had been in place for over ten years and asked what support was in place to provide learning opportunities regarding independence and social skills.

The Head of SEND replied that they expect schools to deliver on the needs set out in Section F of the EHCP. She added that a more robust process had been put in place as part of the Safety Valve work and that decisions regarding the EHCPs are made through a multi-agency panel.

The Chair asked for confirmation that it had been the decision of The Partnership Trust to cease the provision at Fosse Way House.

The Head of SEND replied that it was.

Kevin Burnett informed the Panel that he had been sent an email from The Partnership Trust that said that they were still awaiting a response from B&NES on points that they had raised.

- Evidence based proposals submitted – No response
- Parental evidence submitted - No response
- No amended EHCPs received
- 'Residential' included on one EHCP then removed.

The Head of SEND replied that when the error on the EHCP had been recognised the Council had immediately apologised to those concerned. She said that she recognises that there are those that have complex needs but explained that case law exists on what should be provided, and that 24-hour provision was very unusual.

She reiterated that decisions on EHCPs are made by a multi-agency panel and that a mediation process is available if required.

She explained that the Council has asked The Partnership Trust to continue to work with them.

Councillor Lesley Mansell asked why the provision has to stop after so many young people have benefitted from receiving its service. She said that recent Ofsted reports had consistently praised their work.

She requested that a cost benefit analysis be carried out and asked what additional support could be provided to the pupils at Fosse Way school following this decision.

The Head of SEND replied that it was not the Council's decision to close the service and that there has been a change to the process for implementing EHCPs. She added that most of the staff from Fosse Way House were expected to move to the Fosse Way School setting.

She stated that there were different ways to meet the provision and that residential college settings might be available for certain young people in the future.

The Chair asked for the Cabinet Member to keep the Panel updated on this issue through his updates to them.

Councillor Hardman asked what post-16 residential accommodation was available locally.

The Head of SEND replied that this provision was available close to B&NES, in Somerset and Wiltshire. She added that almost all pupils from Fosse Way House were likely to move to a residential setting or provision from Adult Social Care.

Councillor Ruth Malloy asked if The Partnership Trust had yet made a decision on a future use of the building.

The Head of SEND replied that she was not aware that they had, but said it could be used for additional day pupils. She stated that the staff concerned are valued and that the Council would continue to work with them through this process.

The Panel **RESOLVED** to;

- i) Note the report
- ii) Be assured that Local Authority Officers continue to work strategically with social care, health, schools and other partners to work within statutory guidelines and support schools and other settings in delivering the very best outcomes for our children and young people.

Councillor Lesley Mansell asked for it to be recorded that she did not accept the report.

118 YOUTH JUSTICE PLAN 2024-26 - REFRESH

Councillor Paul May introduced the report to the Panel. He explained that the current two-year Plan had been presented to the Panel, Cabinet and Council in July 2024 for approval. He said that the Panel were now receiving a progress report on the two-year plan ahead of a refreshed version of the Plan being presented to Cabinet and Council in July.

He added that the service recognises the issue of over-represented groups in B&NES who are in the Youth Justice System and informed the Panel that these were groups of children with Special Educational Needs (SEN) and children from minority ethnic backgrounds.

The Head of Young People's Prevention Services addressed the Panel. She stated that it had been a successful year overall and highlighted the following areas.

Inspection Outcome – HMI Probation

- Overall 'Good' Rating
- 3 areas = Outstanding, 9 areas = Good, 1 area = Requires Improvement

Performance Indicators

- Rate of Custody Jan 2024 to Dec 2024
 - There was one custodial sentence in this reporting period. Our rate has reduced to 0.00 per 1,000 in the population.
 - The B&NES custodial rate is better than all Comparators. The rates for Comparators are: South West Region (0.07), PCC Area (0.08) and England and Wales (0.10).
- First Time Entrants Jan 2024 to Dec 2024
 - The rate of First Time Entrants has increased in this period from 108 to 137(46.6%) per 100,000 in the population. This equates to 24 individual children compared with 16 in the previous reporting period (Jan to Dec 2023).
 - The rates for our comparators are: South West (135), PCC Area (122) and England and Wales (161).
- Re-offending Binary rate April 2022 to March 2023
 - The B&NES binary percentage of re-offending has reduced by 5% for the period April 2022 to March 2023. There were 20 children in the previous cohort, 6 re-offended, compared with 20 in the current cohort of which 5 have re-offended.
 - The binary percentage of re-offending is showing as 25%, which is lower than all of our Comparators.
 - The percentages for our Comparators are: South West Region (31.3%), PCC Area (28.9%) and England and Wales (32.5%).
- Re-offending Frequency April 2022 to March 2023
 - The rate of re-offending for this period is 2.00. This is a reduction from 3.67 (-45.5%).
 - This is due to there being fewer children in the cohort and fewer children re-offending. There were 6 re-offenders in the previous reporting period committing 22 further offences and 5 re-offenders in the current period committing 10 further offences.

B&NES Youth Justice Service Priorities

- **1.Reduce Disproportionality** – over-represented groups in B&NES include children with Special Educational Needs (SEN) and children from minority ethnic backgrounds.
- **2.Strengthen Participation** – youth justice work is most effective when it consults children, parents and carers and those harmed by children's offending and works with them to co-create and develop the service.
- **3.Embed Child First Principles** – This principle is the corner stone of our approach moving forward, so appropriately it remained as a strategic priority the plan for 2024 to 2026.
- **4.Reduce Serious Youth Violence** – From participation work with children, parents and carers, it is clear that this is a key issue for them and so it remains a strategic priority for B&NES YJS. Children have shared that knife crime and the threat of serious violence are utmost in their minds.

Youth Justice Service Key Achievements in 2024 / 25

Reduce Disproportionality – Ethnicity and SEN

- Anti-Racist Vision Statement and Action Plan
- Local Good Practice Guide for working with children from minority ethnic background, based on participation work
- Continuous cultural competence and diversity training for all staff
- Speech and Language and Health Screening for all children
- Training for staff on communication and interventions and Neuro Diversity

Reduce Disproportionality

- Increased staff confidence with interventions with children with SEN
- Evidence of consideration of diversity in assessments and case work
- Continued Case Audits to scrutinise for any bias and opportunity for learning
- Develop Education Psychology input into YJS to ensure children's needs are fully understood and responded to

Strengthen Participation

- Increased participation in reparation work
- Children on all practitioner recruitment panels
- Planning parent / carer drop-in support sessions

Embed Child First Principles

- Writing Referral Order reports to the Child
- Implemented the YJB Prevention and Diversion Assessment Tool, which has a child first focus
- We are working with more children on an out of court basis and on diversion programmes
- Continue to work in partnership to reduce the times children are in police custody overnight
- Continue to work in partnership to ensure timely justice for children and victims

Reduce Serious Violence

- Multi Agency Partnership to Prevent and Reduce Serious Violence
- Updated Knife Crime resources, and as a partnership created a Toolkit for Parents
- Identified learning and areas for improvement in plans re: safety and wellbeing and plans re: safety for others and implemented an action plan accordingly
- Build on our offer of support to victims, in particular young victims

Positive feedback from Children, Parents and Carers

Update on the Work of the Violence Reduction Partnership (VRP)

- Strategic Needs Assessment completed
- VRP Delivery Plan submitted to the Home Office for approval for 2025/26
- Work plan to include continued engagement with the community including a survey for children and young adults about knife crime and serious violence
- Close links between VRP and Education teams, SEND and AP Advice Service.

Councillor May commented that he has the partnership working in practice and how effective it is. He explained how the team work with young people and build relationships between them and their families. He added that HCRG was also active in the partnership.

Kevin Burnett referred to page 63 of the agenda pack and asked if confirmation could be given on whether Turnaround funding had ceased in March 2025.

The Head of Young People's Prevention Services replied that they had received confirmation from the Ministry of Justice that they would be in receipt of funding for a further 12 months, but only two thirds of their previous amount.

Kevin Burnett referred to page 75 of the agenda pack and questioned if Children Looked After should also be considered a priority area for the Plan.

The Head of Young People's Prevention Services replied that the refreshed Plan would see them included as a priority area as there is a degree of over-representation.

Kevin Burnett commented that a lot of store is placed upon Trauma Informed Practice.

The Head of Young People's Prevention Services replied that this is something that the team is very passionate about, to be able to learn from those that have directly experienced trauma.

Kevin Burnett asked if any CEOs of the Multi Academy Trusts were part of the decision making process of the Youth Justice Partnership Board.

The Head of Young People's Prevention Services replied that the Principal and CEO of Bath College are members of the Partnership Board

The Interim Director of Children's Services replied that there was not a direct representation for all schools on the Partnership Board.

Councillor Liz Hardman asked for any additional comments regarding the finance / budget of the Youth Justice Service.

The Head of Young People's Prevention Services replied that there is an overspend within the combined budget as costs have risen, but the level of contributions has not. She added that this matter is included on their risk register.

Councillor Hardman referred to the disproportionality of those young people from BME backgrounds and with SEND who are within the Youth Justice System. She said that there were a lot of school based issues that the Local Authority cannot tackle directly and asked to what extent can we work with schools.

The Head of Young People's Prevention Services acknowledged that these were some of our most vulnerable children and that an increase has been seen as more young people are being identified with these needs. She added that this was a concern and that they need to ensure that they work in a preventative way to identify and meet their needs where possible.

The Interim Director of Children's Services added that a range of services are available for schools to access across the Council. He said that permanent exclusions have decreased and that the work of the BME Support Group was ongoing.

Councillor Hardman asked if the Youth Offending Team were able to identify at an early enough stage those children and young people who might be at risk of entering the Youth Justice System.

The Head of Young People's Prevention Services replied that mechanisms to attempt to prevent children and young people from entering the system are in place. She added that the Youth Justice Service works in partnership to prevent children entering the youth justice system, through the Compass Service. She said that referrals are also received from schools and that Prevention Partnerships were in development.

Councillor Lesley Mansell thanked the officer for the report and welcomed the Equalities Impact Assessment and the recommendations / actions within it. She asked for any examples of working with HCRG.

Councillor May replied that Val Scrase, HCRG Regional Director for the South-West had recently taken the role of Chair of the Partnership Board.

The Head of Young People's Prevention Services added that they do work closely with HCRG, in particular the role of the School Nurse and Speech and Languages.

Councillor Mansell commented on the high number children and young people within the system from a BME background.

The Head of Young People's Prevention Services replied that she could circulate the Youth Justice Anti-Racism Action Plan to the Panel.

Councillor Joanna Wright commented that the increase in the number of children and young people within the system with SEND was likely due to more being diagnosed than ever before. She said that parents / carers needed better resources in place to be able to find the support they need.

She asked why the 0.16 FTE Probation Service Officer post had not been filled for over 3 years and how many youth workers were employed in B&NES.

The Head of Young People's Prevention Services replied that this post had not been filled due to a lack of funding, which was a national issue. She added that Youth Services were delivered in many different ways across the Council.

Councillor Ruth Malloy asked for further information relating to Volunteer Panels / Mentors.

The Head of Young People's Prevention Services replied that volunteers could either work on areas such as Referral Orders and meet with the child / parent to address how these should be progressed or as representatives within their local community. She added that some volunteers will also act as mentors.

Councillor David Harding asked if delays in diagnosis of conditions such as ADHD were leading to an increase in numbers entering the justice system.

The Head of Young People's Prevention Services replied that she did not feel that this was necessarily a factor.

Councillor Michael Auton commented that he had recently spoken with a local police officer and Youth Connect South West about lack of provision within Midsomer Norton for safe places for young people to go to.

Kevin Burnett stated that in terms of prevention support that most support services within schools would not be at capacity.

The Head of Young People's Prevention Services replied that the service supports prevention where possible and said that all of Children's Services work in that way to a degree. She added that it was important to provide the required help as soon as possible. She explained that work can commence within the Youth Justice Service from the age of 8.

The Chair said that she felt it was important for young people to have positive role models to work with.

The Head of Young People's Prevention Services replied that where possible they would look to have mentors with a lived experience.

The Panel **RESOLVED** to note the progress against the two-year plan and the delivery of youth justice services in the year ahead.

119 PANEL WORKPLAN

The Chair introduced the item and asked for suggestions for future reports to the Panel. She said that she would welcome the Panel receiving information relating to Youth Services.

Chris Batten asked for the Panel to be updated on the work of the Music Service.

Councillor Ruth Malloy asked for the workplan to be updated with items that have been previously suggested and if any longstanding items could be progressed to come to the Panel.

The Chair and Councillor Hardman agreed and gave examples of Child Sexual Exploitation / Modern Slavery and Community Services Transformation.

Kevin Burnett asked if the Panel could see the results of the School Wellbeing Survey.

The Interim Director of Children's Services replied that he would check when those results are due to be released.

Councillor Joanna Wright raised the issue of Online Safety.

Councillor Lesley Mansell asked if the Panel could be updated on the progress of Adult Social Care Services returning in house.

The Chair said she believed that such a report was due in September.

The Panel **RESOLVED** to note their current workplan and these proposals for future reports.

The meeting ended at Time Not Specified

Chair(person)

Date Confirmed and Signed

Prepared by Democratic Services

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

This Forward Plan lists all the items coming to the Panel over the next few months.

Inevitably, some of the published information may change; Government guidance recognises that the plan is a best assessment, at the time of publication, of anticipated decision making. The online Forward Plan is updated regularly and can be seen on the Council's website at:

<http://democracy.bathnes.gov.uk/mgPlansHome.aspx?bcr=1>

The Forward Plan demonstrates the Council's commitment to openness and participation in decision making. It assists the Panel in planning their input to policy formulation and development, and in reviewing the work of the Cabinet.

Should you wish to make representations, please contact the report author or, Democratic Services (). A formal agenda will be issued 5 clear working days before the meeting.

Agenda papers can be inspected on the Council's website.

Ref Date	Decision Maker/s	Title	Report Author Contact	Director Lead
16TH JUNE 2025				
16 Jun 2025	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Respite Services Update	Suzanne Westhead	Director of Adult Social Care
16 Jun 2025	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Carers Strategy Update	Suzanne Westhead	Director of Adult Social Care
16 Jun 2025	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	The Active Way		Director of Public Health and Prevention
14TH JULY 2025				
FORTHCOMING ITEMS				

Ref Date	Decision Maker/s	Title	Report Author Contact	Director Lead
	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Dementia Strategy Update	Suzanne Westhead	Director of Adult Social Care
	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Covid 19 - Impact of Long Covid across our communities		Director of Adult Social Care, Director of Public Health and Prevention, Director of Children & Young People
Page 72	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Community Services Transformation - Community Health Services offer from April 2025	Laura Ambler, Natalia Lachkou	Director of Adult Social Care
	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Child Sexual Exploitation / Modern Slavery	Mary Kearney- Knowles Tel: 01225 394412	Director of Children and Education

Ref Date	Decision Maker/s	Title	Report Author Contact	Director Lead
	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Attainment Gap Project Update - St John's Foundation	Christopher Wilford Tel: 01225 477109	Director of Education
	Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	Safety Valve Update	Christopher Wilford Tel: 01225 477109	Director of Education
The Forward Plan is administered by DEMOCRATIC SERVICES: Democratic_Services@bathnes.gov.uk				

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