

BATH AND NORTH EAST SOMERSET

MINUTES OF CHILDREN, ADULTS, HEALTH AND WELLBEING POLICY DEVELOPMENT AND SCRUTINY PANEL MEETING

Monday 15th September 2025

Present:- **Councillors** Dine Romero (Chair), Liz Hardman (Vice-Chair), David Harding, Lesley Mansell, Joanna Wright and Michael Auton, Anna Box and Jess David

Co-opted Member (non-voting): Chris Batten

Cabinet Member for Adult Services: Councillor Alison Born

Also in attendance: Suzanne Westhead (Director of Adult Social Care), Rebecca Reynolds (Director of Public Health & Prevention), Laura Ambler (Place Director for the B&NES locality in the Integrated Care Board), Marcia Burgham (Public Health Principal), Victoria Stanley (Head of Primary Care – Community Pharmacy Optometry and Dentistry, BSW ICB) and Helen Wilkinson (Community Pharmacy Clinical Lead, BSW ICB)

25 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

26 EMERGENCY EVACUATION PROCEDURE

The Chair drew attention to the emergency evacuation procedure.

27 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

Apologies for absence were received from Councillors Onkar Saini, Paul Crossley, Bharat Pankhania and co-opted member Kevin Burnett.

Councillors Jess David and Anna Box were present as substitutes for the duration of the meeting.

28 DECLARATIONS OF INTEREST

Councillor Michael Auton declared an other interest with regard to agenda item 10 (Adult Social Care Improvement Plan Progress Update) as through his work with Community Catalysts he works with many people involved in Adult Social Care.

29 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIRMAN

The Chair informed the Panel that she intended for an update of the Early Help Task Group to be given at their October meeting.

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

Questions to Councillor Alison Born (Cabinet Member for Adult Services) have been received and responses have been circulated. A copy of them can be found as an online appendix to these minutes.

31 PRESENTATION: EMPLOYMENT INCLUSION SERVICE / VOCATIONAL HUB FOR ADULTS

The presentation was deferred until another meeting of the Panel.

32 CABINET MEMBER UPDATE

Councillor Alison Born, Cabinet Member for Adult Services addressed the Panel and highlighted the following points from her update.

Newton House

B&NES families who draw on care and support at Newton House came together on 18th July to share their experience and hear from the working group looking at options for future building-based respite services. The meeting was attended by 4 parents, managers from Dimensions and council officers, who recognized the value of continuing to regularly meet together to take this work forward.

Updated the group on the contract changes coming up in 2026 and a strategic piece of work to review current services and develop a Learning Disability, Autism, and Neurodiversity framework. This is a significant undertaking, encompassing community support, day support, and supported living services. Respite care is also part of this broader initiative.

Discussed the importance of long-term planning, including understanding future housing needs for individuals and families. By working together, we can ensure that the B&NES Local Plan reflects the housing needs of individual and families.

The update has been shared with all families who use Newton House support. The working group will continue its work on the all-age respite and all families will be invited to take part, with more opportunities for engagement opening in the autumn.

Community Support Recommissioning

Recommissioning of community support services is progressing as planned. Several tenders were evaluated in August, with more evaluations happening in September, with good level of engagement from health and social care practitioners and carers, as relevant for each service. We are on time to finalise contract awards by the end of September. A communication strategy is being updated, and procurement outcomes will be communicated later in the autumn.

Community Resource Centres & Extra Care Housing

CQC conducted an unannounced inspection of Cleeve Court in July following a 'test and learn' approach with an expert by experience as part of the inspection team. The inspection concentrated on the domains of Safe and Well Led as these were rated as requires improvement in the previous inspection. As part of the inspection methodology the service has worked with the Lead Inspector to develop an action plan, and this has been updated and reviewed with the Lead Inspector in early August. It is expected that the inspection report will not be available until mid-late September from CQC.

Visits – Suzanne Westhead (Director of Adult Social Care) and I visited both Cleeve Court and Combe Lea during August and were delighted to meet staff, residents and some visiting relatives. Since taking these regulated services back in house in 2020, B&NES has invested significantly in both staff and infrastructure and I was struck by the many improvements since I last visited.

Both homes are clearly offering high quality, person centred care in a comfortable and homely environment and staff are committed to ensuring that residents live fulfilling lives for the time that they are there.

Cool Spaces

With our Summer's becoming warmer, Public Health and Sustainable Communities have worked with partners to ensure residents' can access cool spaces. Companies and community organisations in Bath and North East Somerset who could provide a cool indoor space for residents to rest on hot days and shelter from the sun are being encouraged to register on a new Indoor Cool Spaces Directory. Each Indoor Cool Space provider will agree to certain facilities being available such as toilets and drinking water, and will sign up to the Cool Spaces Charter which guarantees visitors respect, dignity and a warm welcome. An online map and directory has also been developed so that residents can look up where their nearest cool space is. This includes indoor spaces and outside shaded areas.

Councillor Liz Hardman said that she welcomed the update on Newton House, but sought assurance that things were moving on as part of the process.

The Director of Adult Social Care replied that they had agreed with all the families to go out to tender for an all-age respite service and said she would seek to bring a timetable for that process to the November meeting of the Panel

Councillor Hardman asked for further information regarding Be Well B&NES as to who was overseeing this work.

The Director of Public Health & Prevention explained that it was part of a Health Improvement Framework that was identifying lots of commonalities across the Council with the hope of providing a whole system approach to the issues identified.

The Public Health Principal added that a steering group, comprising of Council officers and external partners was in place to work with communities. She added that

a Be Well B&NES Children and Young People's Network is in place and prioritising delivery of the Education Attainment Action Plan.

Councillor Hardman commented that she thought the Cool Spaces was a great initiative and asked if more were to be added for next year.

Councillor Born replied that with the increased temperatures over the summer it was clear that this initiative was needed. She added that the foundations were now in place and would identify more spaces where possible for next year.

Councillor Anna Box referred to the NHS 10 Year Plan and said that more emphasis was being placed on holistic care, preventative measures and lack of hospital escalation. She asked what role Public Health will play in accessing funding as the model was changing from fund per service to yearly payments.

The Director of Public Health & Prevention replied that they work alongside their NHS colleagues, other Regional Public Health Directors and nearby Public Health teams across the ICB and ICA on both a practical and policy planning level to see how we can work effectively across the system to avoid pressures.

Laura Ambler, BSW ICB, explained that there are 3 key areas as to how the NHS intends to work in the future.

- From hospital to community: More care will be available on people's doorsteps and in their homes
- From analogue to digital: New technology will liberate staff from admin and allow people to manage their care as easily as they bank or shop online
- From sickness to prevention: We'll reach patients earlier and make the healthy choice the easy choice.

She said that she felt that locally they were a little ahead of the plan, although work was required to align with ongoing programmes for drugs and alcohol for example.

She added that she would also be working with the Director of Adult Social Care regarding the Better Care Fund.

Councillor David Harding referred to Be Well B&NES and said that different pressures exist within the rural areas of the Council. He asked when they could see work from this project be in place to help them.

The Public Health Principal replied that the project had been focussing on the areas of Twerton and Whiteway for the past two years, but has also been looking at how the wider population of the Council can be supported. She stated that any local arrangements were planned to remain in place.

Councillor Jess David asked if outdoor shaded areas have been considered to be included in the Cool Spaces Directory.

The Director of Public Health & Prevention replied that they have and were likely to be included in the spaces available next summer.

Councillor David asked if the Parks department had been involved in the Governance of Be Well B&NES.

The Director of Public Health & Prevention replied that they were as representatives from across the council were part of the Steering Group.

Victoria Stanley, Head of Primary Care – Community Pharmacy Optometry and Dentistry, BSW ICB, addressed the Panel to inform them of a project that had recently commenced that will see local GPs and Dentists promote prevention work for mouth care and oral health. She said that this was the first time for such a collaboration and that they were hopeful for improvements.

The Chair said that she would welcome an update on the project in due course.

Councillor Lesley Mansell asked if the future delivery of the Holiday Activity and Food Programme would include areas of North East Somerset.

The Public Health Principal replied that feedback has been gained following the programme and was pleased to report that the SEND offer had been strengthened alongside an extension to the range of activities. She said that she would share a list of where the programme had taken place and that a list of future activities would be updated soon.

Councillor Mansell referred to sexual health and the upcoming agenda item of the School's Health and Wellbeing Survey and asked if promotion of safe sex was carried out within schools and colleges.

The Director of Public Health & Prevention replied that lessons on sexual health will be delivered by different curriculums and will vary from school to school. She added that they work with many of the school nurses and said that work was ongoing to deliver information to Fresher's Fairs for the new intake of students.

The Public Health Principal added that key stakeholders would be made aware of any issues ahead of the next survey.

Councillor Mansell commented that the Cool Spaces was a great initiative and encouraged more to be done to make the public aware of it.

The Chair referred to Newton House and asked if parties had learnt from each other and the overall process.

The Director of Adult Social Care replied that she believed they had and explained that two events had been held as part of the process. She stated that the families have been very clear on what they expect and that as officers they were constantly learning.

The Chair asked if further information could be provided relating to the Community Support Recommissioning.

The Director of Adult Social Care replied that a Community Support Transfer & Strategy Group was in place oversee this work and that ten events have been held with providers to enable feedback to be given.

The Chair asked why the new online free testing service for chlamydia and gonorrhoea was specifically for women.

The Director of Public Health & Prevention replied that this was because of the known reproduction health risks for women concerning these infections. She added that their sexual partners would be contacted as part of the service if their details are given. She explained that an in person testing service remains available for all at the Riverside Health Clinic in Bath.

The Chair asked if the Council's Community Drug and Alcohol Service were working with homeless people within the area.

The Director of Public Health & Prevention replied that there is an outreach team that work alongside officers from Housing Services.

The Chair, on behalf of the Panel, thanked Councillor Born for her update.

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

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

Chair announced for new Integrated Care Board cluster

Rob Whiteman has been announced as the new Chair of the Dorset, Somerset and BSW Integrated Care Board cluster. Previously Chair of NHS Dorset, Rob's appointment comes as ICBs across the country, including those in the south west, come together across much larger geographical footprints as part of the government's planned changes to the form and function of Integrated Care Boards.

While work is continuing at pace to formally establish the new cluster organisations, the three existing ICBs remain focussed on delivering their respective operational plans and developing programmes that will deliver the improvements required by the recently published 10 Year Health Plan.

Hospital passports for members of the Gypsy, boater and traveller communities who have a learning disability and/or autism

The ICB has worked with providers to help more individuals with a learning disability and/or autism, who are at risk of hospital attendance or admission, to receive a hospital passport.

There are a small number of people with a learning disability and/or autism living in Bath and North East Somerset who are members of the Gypsy, traveller and boating communities who have such passports.

It is currently not possible to provide everyone with a health passport and this work is targeted at those at greatest risk, such as individuals who have frequent attendances and admissions to hospital under the high intensity user programme.

Working together to co-design the future of neighbourhood health, including the delivery of integrated neighbourhood teams, presents further opportunities to develop health passports.

Update on region's new £20 million specialist mental health facility

Work to put the finishing touches to a new purpose-built specialist mental health inpatient facility in Bristol is well under way. The Kingfisher will be a state-of-the-art care environment, fully equipped to provide personalised support to autistic people and those with learning disabilities whose needs cannot be met by existing community mental health services.

Having this modern facility based locally will help to ensure that more patients living in Bath and North East Somerset, Swindon and Wiltshire receive the specialist care they need closer to home, while also reducing the likelihood of people being cared for out-of-area and away from family and friends.

The Kingfisher has been designed and built with input from service users, people with lived experience of the type of the care the new unit will be providing, as well as their families and carers.

When fully open in 2026, the facility will be able to provide short-stay admissions for those in genuine need of supervised hospital-level care.

Councillor Michael Auton commented that the NHS 10 Year Health Plan was likely to have wider issues for the rural areas of the Council and its older population, in particular regarding the digital changes. He asked if the BSW ICB had a specific plan for the region's health and care needs.

Laura Ambler replied that she would reply formally to this question via a future update report to the Panel. She said though that there is a requirement to have in place integrated neighbourhood teams to provide community services such as nursing, therapy and personal care to homes, care homes, clinics, schools and community centres to bring more personalised support to local people.

Councillor Lesley Mansell said that the footprint of the new ICB cluster was huge and asked how this would affect local decision making.

Laura Ambler replied that an operating model had yet to be determined and said that the blueprint remains in place with the identified functions to be delivered locally.

Councillor Mansell commented that she welcomed the work carried out regarding health passports and asked if consideration could be given to them also being provided to members of the public with dementia and mental health needs.

Laura Ambler replied that they could consider whether information gathered as part of a Care Act Assessment could be captured as long as the person concerned was able to give their consent.

Councillor Mansell asked if the take up of flu vaccination invites would be monitored and could the information be shared with the Panel.

Laura Ambler replied that she was sure that data would be available and would seek to provide it in a future update report.

Councillor Mansell asked how access to the Kingfisher facility would be measured.

Laura Ambler replied that there is an operating plan that contains some local metrics that has been discussed with the ICB Board and suggested that this be shared with the Panel. She added that 'lived voice' feedback would continue to be sought when the site opens.

The Chair referred to the topic of the ICB cluster and said that she was not sure that she had seen the blueprint that was mentioned in an earlier answer.

Laura Ambler replied that this could be shared with the Panel and advised that some elements will have changed since its first publication.

The Chair commented that she had concerns that some local elements of work might be unpicked in the new cluster arrangements as it may move away from provision within Bristol.

Laura Ambler replied that other cluster options were considered, but explained that the patient flow does make sense for the footprint. She said that they were aware of the range of views that need to be considered in the next stage of this process.

Overview of how decisions around local pharmacy provision are made

The purpose of the Pharmaceutical Needs Assessment is to understand the needs of a given population, and to help decisionmakers in that area plan new services and identify any gaps within current provision.

The PNA, which is valid for up to three years and publicly available through the Bath and North East Somerset Council website, is used by NHS England when making judgements on applications to make changes to a local community's pharmacy provision.

While there may be some changes over time in the location or opening hours of particular pharmacies, the PNA assesses provision across localities as a whole.

It also aims to ensure that gaps are not identified inappropriately, nor in locations where the market cannot sustain another provider. PNAs will consider issues such as future housing developments, GP practice changes and major infrastructure projects which could affect the need for local services.

Victoria Stanley, Head of Primary Care – Community Pharmacy Optometry and Dentistry addressed the Panel. She explained that the PNA had been discussed at the Health & Wellbeing Board earlier in September and thanked them for their comments and observations.

She said that the issue of temporary closures across the Council had been noted by the Board.

Helen Wilkinson, Community Pharmacy Clinical Lead, BSW ICB said that ongoing support is available for Community Pharmacies.

The Chair asked if a definition for the term 'temporary closure' could be given.

Victoria Stanley replied that the term is used to allow pharmacies to close temporarily for a number of different circumstances. She added these could range from a pharmacist not being present on site, low number or lack of permanent staff or issues with the pharmacy premises.

Councillor Michael Auton asked if population numbers within certain geographical locations were considered a factor as part of the PNA. He added that he felt there was a low provision of pharmacies in the rural areas, particularly Midsomer Norton and was concerned about the potential growing pressures on pharmacies and GPs.

Victoria Stanley replied that there is an application process to follow for those seeking to open a new premises, but said this was not led by the ICB or the NHS. She added that the onus was on the applicant to address how local services would be improved.

Helen Wilkinson said that pharmacists are in the process of being freed from dispensing roles as pharmacy technicians were receiving training to take on more dispensing responsibilities that will allow them to supply and administer medicines. She added that all newly qualified pharmacists will become independent prescribers from 2026, enabling them to directly treat patients and deliver more clinical services (when these are commissioned).

Councillor Michael Auton commented that recent census numbers have shown that the number of older people is increasing locally and was therefore likely to have an impact on health services.

Councillor David Harding referred to GP dispensaries and lack of access to the pharmacy App in rural areas. He said that GP dispensaries do not receive Pharmacy Access funding, have to pay for their own IT support and he was concerned about the possibility of an increase in the digital divide.

Victoria Stanley replied that they would offer support to a dispensing GP where possible.

Helen Wilkinson asked Councillor Harding to send further information to them regarding his concerns.

Councillor Lesley Mansell commented on the number of pharmacies available in Radstock and Midsomer Norton and their variation in opening hours. She asked if any gaps in provision had been identified / addressed following the PNA.

Victoria Stanley replied that no gaps in provision had been identified. She said that online pharmacies were available to deliver prescribed medication directly to people's homes.

The Chair asked what could be done to encourage more people to take up roles such as Dentists, GPs and Pharmacy staff as there was a shortage / capacity issue.

Helen Wilkinson replied that work has taken place within schools and colleges to raise awareness of such roles. She added that the previously mentioned pharmacy changes planned for 2026 may help with an increase.

The Chair asked if they had considered a focus on recruiting older people or those potentially seeking a career change for pharmacy positions in particular.

Helen Wilkinson replied that they had not and thanked her for the suggestion.

Councillor Liz Hardman referred to the transfer of services between AWP and HCRG Care Group that took place in April and said she was concerned that no proper transfer plan was in place for people in receipt of the Autism Diagnostic Service or the ADHD Prescribing Service.

She said that she believed that around 5,000 people were still awaiting a diagnosis and asked how the work of HCRG Care Group would be monitored.

Laura Ambler replied that an update had been recently been given to the Wiltshire Health Overview & Scrutiny Panel and that this could be forwarded to this Panel. She said that she was aware of the significant waiting times for a diagnosis and that all who were on the waiting list had been written to at the time of the transfer to make them aware of their choices.

She explained that a lack of a diagnosis should not unduly delay any request for reasonable adjustments.

She said that they were working on a range of strategies to enable and help people to wait well, in terms of their diagnosis and that around 50 cases had been identified as needing to be advanced.

She said that measures were in place to monitor the work of HCRG Care Group through their community based contract. She added that improvements have been

noted recently in Children & Young People with learning disabilities. She added that further information could be provided in a future update.

The Chair commented that it was disappointing to see the RUH receive a low ranking in the recently released NHS trusts performance league tables.

Laura Ambler said that she would prefer colleagues from the RUH to provide a response on this matter. She added though that the rank will not always correspond with the experience of the patients.

The Chair said that the Panel should consider inviting representatives from the RUH to a future meeting.

The Chair, on behalf of the Panel, thanked Laura Ambler, Victoria Stanley and Helen Wilkinson for attending and the BSW ICB for their update.

34 CQC ACTION PLAN UPDATE

Councillor Alison Born introduced the report to the Panel. She explained that the Adult Social Care Improvement Plan is aligned to specific CQC feedback and structured according to the CQC Local Authority Assessment Themes.

She stated that there are 9 improvement priorities across the four CQC Themes with 15 projects/action plans to deliver them.

Councillor Liz Hardman said that she could see a lot of positives in the report and asked if it was felt that they were able to meet the challenge of enabling sustainable improvement.

The Director of Adult Social Care replied that she believed they would be able to achieve the work set out in the Improvement Plan and was particularly proud of the work carried out so far with carers and the Carers Centre. She added that a Healthwatch survey was due to be distributed in the next month to ascertain further feedback and that the Panel would be updated on this at their January 2026 meeting.

Councillor Jess David stated that she was reassured by the report and asked if there was any indication of when the next CQC assessment might take place.

The Director of Adult Social Care replied that she expected the service to be assessed again by the summer of 2026 and that there would be a focus on public experience, with themed assessments also likely.

Councillor Lesley Mansell said that the service must do its utmost to ensure that there is a level playing field for all in terms of the co-production of services. She added that whilst the EQIA with the report was welcome, its focus was the Improvement Plan and she asked for a separate one to be provided for the service users.

The Director of Adult Social Care replied that there is a level playing field in place for co-production and that a range of communications was being used to share information with organisations such as Live Well B&NES and the Community Wellbeing Hub.

With regard to further EQIAs, she said that this was under consideration as part of their ongoing work and that they would seek to demonstrate their understanding of protective characteristics as work progresses.

Councillor Joanna Wright asked if the service had enough resources for the work they are required to do.

The Director of Adult Social Care replied that to have the contingencies available within this financial year for extra staff has been so helpful. She said that where possible staff were using new IT products / apps to aid them in their work. She explained that for the forthcoming financial year they were seeking an additional £5m of investment to assist with two continuing areas of growth, older people and transitions.

The Chair asked how often staff have to undertake equalities duty training.

The Director of Adult Social Care replied that this was mandatory for all staff on an annual basis.

Councillor Wright asked when the Panel could expect to discuss the forthcoming Council budget.

The Director of Adult Social Care replied that she believed that this process would begin in November / December.

The Panel **RESOLVED** to:

- i) Note the summary of progress towards the Adult Social Care Improvement Plan which highlights main themes and action for achieving a good CQC rating.
- ii) Agree that a further update report on the progress against the ASC Improvement Plan is submitted to Panel in January 2026.

35 CHILDREN AND YOUNG PEOPLE HEALTH & WELLBEING SURVEY

Councillor Alison Born introduced the report to the Panel. She explained that the survey provides robust data and insights into the health, wellbeing, and behaviours of children and young people, supporting evidence-based service planning and targeted interventions.

She informed the Panel that the work is supported by St John's Foundation, which has provided grant funding to B&NES Council to enable the continuation of the SH&WS for five survey rounds on a biennial basis, through to 2030.

She stated that a number of areas for concern have been identified and that the survey highlights persistent inequalities affecting vulnerable groups, including pupils eligible for Free School Meals (FSM) either now or in the past six years, those with s SEND, young carers, children looked after and those identifying as LGBTQ+, pupils living with just one parent or from BAME backgrounds.

Councillor Liz Hardman commented that she felt that the survey was a useful tool and was pleased to see that arrangements were in place to start the organisation of the next survey.

She asked what can be done to improve the response rate (58%) from Primary Schools, while noting that 100% of Secondary Schools had responded.

The Public Health Principal replied that all schools are invited to take part in the survey and that they had not received a direct notification to say that a school would not be taking part. She said that the assumption was that they had not had the time to complete it.

Councillor Hardman asked what can be done to improve the areas of concern identified.

The Public Health Principal replied that Public Health use the survey to assess where resources should be placed, promote particular campaigns and to advise partners in B&NES, Swindon & Wiltshire.

Councillor Hardman said that she was concerned that the inequalities for Young Carers were across many of the categories.

The Public Health Principal replied that the concern was shared and she was aware of work planned to begin to address this.

The Director of Public Health & Prevention added that they would also welcome suggestions for where the results of the survey could be shared.

Councillor Anna Box raised a number of points on behalf of Councillor David Harding who had left the meeting.

- The increase in self harm from 14% to 17% in primary schools. Was this known why and is there a policy to address it?
- Vaping remains high with 27% of secondary and 54% of FE students having tried e-cigarettes at least once. Work to be done.....
- Exercise – No mention of this within the survey to address obesity or losing weight. Young people should be encouraged to enjoy exercise.

The Public Health Principal replied that self harm remains a priority locally and that Mental Health support teams were in place across BSW alongside School Nursing.

She explained that a Parent & Carer seminar had been held recently on vaping and hoped that information gained from this would lead to ways that could be identified to reduce numbers.

She stated that exercise was indeed a key area to address to ascertain the level of physical activity undertaken by young people.

Councillor Michael Auton asked if a list of the schools that did not take part was available to be able to encourage their involvement.

The Public Health Principal replied that she would check what information could be shared and said the offer of help was appreciated.

Councillor Jess David asked if the data from the survey could be compared nationally.

The Public Health Principal replied that not all areas of the country take part in the survey. She added that they do compare some elements of the data with the Office for National Statistics.

Councillor Joanna Wright commented that she was concerned about the amount of screen time / digital use by young people.

The Public Health Principal replied that they are aware of this as an issue and said that schools do receive an individual report back for them to use the results to address areas of concern.

Councillor Joanna Wright asked when the B&NES Play Policy was last reviewed.

The Public Health Principal replied that she was not able to answer that question.

Councillor Lesley Mansell commented that she acknowledged the areas of concern raised and asked how young people could be addressed to ensure that messages are being received correctly and understood.

She also asked if the Primary questions were set out for them in the right way.

The Public Health Principal replied that she wanted to assure the Panel that representatives from the provider carrying out the survey attend the school to support survey responses from pupils.

The Chair commented that she would welcome an update on this work to a future meeting of the Panel.

The Director of Public Health & Prevention replied that it was their role to share the results of the survey and to change, where direct control allows. She added that they could seek follow-up from partnerships on other matters.

The Panel **RESOLVED** to promote and refer to the survey results when considering the needs of their local children and young people.

36 MINUTES: 14TH JULY 2025

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

37 PANEL WORKPLAN

The Chair introduced the item and referred to the following items that were already on the workplan/had been raised at this meeting:

October (Children)

Covid figures / Flu / Vaccination update

Play Policy

Free School Meals – Auto enrolment

Safety Valve - DfE/Culverhay issue

St Michael's Primary School/Orchestra of Everything update

November (Adults)

Modern Slavery

January (Adults)

CQC Action Plan Update

Other (no timescale)

Home to School Transport

Community Wellbeing Hub / Live Well B&NES (Attend the Panel)

Attainment gap, to include wider determinants project from public health

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

The meeting ended at 12.19 pm

Chair(person)

Date Confirmed and Signed

Prepared by Democratic Services

This page is intentionally left blank

Children, Adults, Health & Wellbeing Panel – 15th September 2025

Questions to the Cabinet Member for Adult Services

Question:

How is co-production of the Learning Disability, Autism and Neurodiversity framework taking place especially as relates to supported living services supporting people with very complex needs? How does this include parents/carers who are advocates, appointees and deputies? This co-production is imperative given that B&NES Council do not have an up-to-date autism strategy and no learning disability strategy.

How will meaningful consultation take place on this Framework and what are the timescales for this in light of recommissioning of services in 2026?

How is co-production taking place and how are parents/carers who are advocates, appointees and deputies being involved in the recommissioning of services in 2026 and what are the timescales for this?

How will the commissioning process ensure that the commissioned services meet the needs of all service users, including supported living service users with profound learning disability, non-verbal autism and complex health care needs?

Having been through a change of service provider previously, if the service provider changes, how will the significant resource required to support the service user as they transition from one provider to another be given? It takes at least 6 months for the new service provider to be up and running to provide support and understand a service user with very complex needs. In our experience, you lose most of your current staff who know the service user well and safeguarding risks increase significantly. How are these and further considerations being thought through? This is now also in the context of service reductions both in the local authority and the ICB – e.g. no social workers knowing the service user, no occupational therapy support etc.

Response:

We welcome these suggestions and will use them to inform the council's approach to recommissioning. As highlighted in the Lead member's report (agenda item 8), several B&NES families using respite care are keen to continue to work with the council on shaping future services. The respite working group will continue and invitations to families explaining next set of opportunities to take part will be sent later in September.

Alongside the work on developing a new all-age respite offer, officers are bringing together initial information required to develop a new framework to commission services for people with a learning disability, autistic people, or neurodivergent people. Voice of experience, parents and advocates will be at the centre of this work, including voice of people currently drawing on care and support and of people who might need it in the future. Work on developing the new framework is being progressed in September-October. We will update the panel on the approach and timeline at a future meeting.

Regarding the suggestion indicating a decrease in the number of Social Workers and Occupational Therapists (OTs) within the local authority. Contrary to this suggestion, I am pleased to share that Adult Social Care (ASC) has invested in increasing the number of Social Workers and OTs.

This positive development is clearly evidenced by the report presented to the Health and Well Being Policy Development and Scrutiny Panel, specifically in item 10 of the ASC improvement update. The investment reflects our commitment to strengthening our workforce and enhancing the quality of care and support we provide to our community.