

BATH AND NORTH EAST SOMERSET

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

Monday 19th January 2026

Present:- Councillors Dine Romero (Chair), Liz Hardman (Vice-Chair), Paul Crossley, David Harding, Lesley Mansell, Joanna Wright, Onkar Saini and Michael Auton

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

Cabinet Member for Adult Services: Councillor Alison Born

Cabinet Member for Children's Services: Councillor Paul May

Also in attendance: Jean Kelly (Director of Children's Services & Education), Rebecca Reynolds (Director of Public Health & Prevention), Claire Thorogood (Assistant Director for Adult Regulated Services & Governance), Christopher Wilford (Director of Education & Safeguarding), Ann Smith (Assistant Director - Operations & Safeguarding), Ceri Williams (Policy Development & Scrutiny Officer), Lucy Baker (Director of Place, CYP, LDAND, BSW ICB) and Darryl Freeman (Executive Director - People)

74 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

75 EMERGENCY EVACUATION PROCEDURE

The Chair drew attention to the emergency evacuation procedure.

76 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

The Director of Adult Social Care had sent her apologies to the Panel.

77 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.

78 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIRMAN

There was none.

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

Cindy Carter addressed the Panel with regard to the current budget proposals, a copy of the statement can be found as an online appendix to these minutes, on the Panel's Minute Book and a summary is set out below.

"I recognise that the Council is operating in a challenging financial and operational environment, and I appreciate the difficult decisions adult social care faces. The current consultation proposes achieving savings through future recommissioning of learning disability services and through Care Act reviews with a stronger focus on cost-effectiveness. While these are described as efficiency measures, for people with learning disabilities—especially those with profound and complex needs—they have real consequences for how care is commissioned, reviewed, and delivered.

For people like my son, care is not optional or flexible. It relies on stable providers, skilled staff, and consistent, trusted support. Cost-driven changes can reduce staffing levels, lower skill mixes, disrupt continuity, or destabilise providers. These are not abstract concerns: they can lead to safeguarding risks, deterioration in health, loss of skills, and more restrictive support rather than greater independence.

A key concern is timing. I would welcome reassurance from the Committee on how outcomes for people with learning disabilities will be protected when the recommissioning framework is not yet in place.

People with learning disabilities are a protected group under the Equality Act. Small changes in commissioning or review practices can have disproportionately large impacts, so careful mitigation is essential as proposals develop.

Co-production is a statutory requirement under the Care Act 2014. At present, there has been limited meaningful involvement of people with learning disabilities, their families, or Court-appointed deputies. Strengthening engagement would help ensure decisions reflect how services work in practice, supporting continuity and stability for those most affected.

There are positive local examples to build on. The commissioning of respite provision at Newton House has shown the value of co-production, user choice, and continuity of care. I encourage the Council and the Committee to apply these lessons to the recommissioning of supported living services, so future models are shaped by lived experience and deliver the stability, quality, and outcomes that matter most to individuals and families."

Alan Carter addressed the Panel with regard to the current budget proposals, a copy of the statement can be found as an online appendix to these minutes, on the Panel's Minute Book and a summary is set out below.

"I am here as a Dad and as Court of Protection appointed Joint and Several Deputy for my son, who has a profound learning disability and complex health care needs. He lives in supported living and relies on commissioned care and support to meet his needs safely and lawfully.

The Committee will be considering proposed local authority budget proposals, which include changes affecting people with learning disabilities through care package reviews and the recommissioning of services.

We are seeing challenges between B&NES Council and BSW ICB in determining which organisation is responsible for meeting assessed needs under the Care Act. These are not abstract issues—they arise in day-to-day care planning. While funding responsibilities are clarified:

- Care can be delayed or questioned,
- Families and deputies are placed in the position of helping resolve funding disputes between B&NES Council and BSW ICB, causing uncertainty and stress,
- And people with learning disabilities may face increased risk.

The law is clear: Care Act assessed needs must be met, and funding disagreements must not disrupt care. We recognise the pressures on both organisations, but these duties remain critical and statutory.

It is equally important to consider how joint working between the local authority and ICB can be strengthened so that care delivery is not adversely affected.

This is not simply a financial issue—it is about ensuring that public bodies work together effectively to uphold their legal and ethical duties to some of our most vulnerable citizens. By approaching these challenges collaboratively, we can ensure that care remains safe, reliable, and person-centred.”

The Chair thanked them both for their statements on behalf of the Panel.

Councillor Liz Hardman asked if they had received any information regarding the recommissioning framework which has led to them seeking some assurances.

Cindy Carter replied that they had not as it had not been published. She added that it was because this remains unclear that they have raised their points as they would like to know the level of impact it will have.

Councillor Hardman asked if they would like to comment further on their concerns over the ICB and the Council to work together to provide continuity of care.

Cindy Carter replied that the concerns were around the organisations and how they differ in their ways of funding. She explained that some recipients have a combined social and health care package and some will just one of the two elements. She said that there was a need to fully establish which bodies cover which packages of care.

Councillor Joanna Wright asked if they were aware of any disputes regarding care packages. She said that she understood the level of complexity in the current system and that parents and carers have to do a lot of work to be able to navigate their way through it.

Cindy Carter replied that it was indeed very difficult to navigate, especially as the system evolves. She said that co-production should be supported as much as

possible and highlighted the importance of Care Act Assessed needs -v- other core needs.

Councillor Wright suggested the Panel analyse the issue further in a future meeting, including coproduction between the Council and the ICB.

Councillor David Harding asked if they could provide any practical examples of the difficulties of having to navigate between two systems.

Cindy Carter said that it was a statutory responsibility to provide needs identified under a Care Act Assessment, but that a difference of opinion could come about over Chiropody and whether that is accounted for under social or health care. She explained that a compliance process is in place, but that can be long and quite onerous.

She added that having a named Social Worker would be of a high benefit and that for those people who have complex needs a high level of experience is required.

The Assistant Director for Operations & Safeguarding stated that joint funding is in place for around 400 individuals across the Council and that they could bring a future report to the Panel about the funding process. She said that they would attempt to make clear what services Adult Social Care can and cannot fund.

She explained that despite it being a recognised recommendation to have a named Social Worker, there are not the resources available locally to provide this. She added that for those people who are deemed to be a complex case they were working towards all having a main contact within the Council.

Lucy Baker, Director, BSW ICB thanked them both for their statements and said that a full response would be provided regarding their concerns. She added that they were aware of their statutory responsibilities for funding and that services were delivered through health representatives and commissioners.

She stated that the process for making joint decisions between the ICB and the Council has been strengthened.

Councillor Eleanor Jackson addressed the Panel. She spoke about a charity, Swallow, in her own ward that enables children and young people to maximise their potential through education and training.

She said that as a councillor you can be presented with a complex situation and need to find out if it is typical and how or if it can be resolved.

She commented that the report written regarding Adult Social Care complaints had been well written by the Complaints and Data Protection Team Manager.

She stated that she was concerned about the proposed savings within the budget and how they were to be achieved. She said that input should be sought from service users to establish a better quality of care.

She said that she supported earlier comments made and would welcome further coproduction across the Council.

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

Rosie Phillips, Chief Executive, Developing Health & Independence (DHI) addressed the Panel. She acknowledged that it was a difficult climate for many organisations at the current time and said communication was therefore key to making sure that all parties are aware of decisions or potential changes.

She stated that many local people depend on stable, local services for support and said that DHI had provided many services within B&NES over the past 25 years. She added that she felt that they had also delivered value for money services for the funding they received.

She explained that the loss of the Drug & Alcohol Treatment contract was a big issue for DHI and encouraged the Council to scrutinise their successor on the delivery of the contract.

She informed the Panel that funding for Reach, their housing support service, had recently changed from a contract to grant funding.

She stated that she felt let down by a lack of communication from the Council and said organisations need to be made aware of decisions or the potential for change in a timely manner to enable them to plan and structure accordingly.

Councillor Hardman said that she was sorry to hear of issues encountered as part of the procurement process and thanked DHI for their many years of work within the area.

Councillor Michael Auton commented that having previously been in contact with DHI he would welcome the opportunity to discuss with them the services they provide.

Councillor Wright asked when had been the last time that DHI had been able to have a meeting with the Council relating to funding and contracts.

Rosie Phillips replied that a meeting had been held in November 2025. She added that they were informed that funding to Reach was likely to be cut by a third, but are still unsure as to the timing of this decision.

Kevin Burnett asked what would be the main thing that the Council could do to improve the budget process.

Rosie Phillips replied that communication was the key area to improve upon. She said that organisations need notice to plan their work, fundraising, recruitment, structure – this all takes time to plan. She added that it was also disappointing that the procurement process was solely a paper exercise with no interviews carried out.

Councillor Alison Born, Cabinet Member for Adult Services commented that these matters would have been dealt with as part of the Public Health procurement process and said that Housing was not part of her portfolio.

The Chair thanked Rosie Phillips for her statement on behalf of the Panel and requested that the Panel receive a report on the procurement processes for both Adult Social Care and Public Health at a future meeting.

80 MINUTES: 15TH DECEMBER 2025

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

81 CABINET MEMBER UPDATE

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

Community Support Contract Awards

Following robust mobilisation and smooth transition, six Community Support Service contracts went live on 1st January 2026.

Two further Community Support Service tenders have concluded under the new Procurement Act 2023 using the Light Touch Regime for above-threshold social care contracts in December 2025. These two contracts will commence in April 2026, with mobilisation and implementation activity now underway to ensure a smooth transition and continuity of support for residents across Bath and North East Somerset.

This concludes the recommissioning of the Community Support Service contracts undertaken in 2025.

Newton House update

Adult Social Care staff have continued to work with families who access care and support at Newton House to shape the future design of respite services. To date, they have held three dedicated sessions focused on service development and defining what "good" looks like for both families and individuals using the provision.

In parallel, we have engaged with our procurement and legal teams to explore the flexibilities within the Procurement Act 2023 and identify viable routes to market. In line with our statutory duties under the Care Act 2014 and the Procurement Act 2023, the Council has carefully considered the option of a direct award for respite provision at Newton House, utilising the User Choice provision. This approach reflects the expressed preferences of families and it addresses the critical need to ensure continuity of care for vulnerable adults and their carers.

The option to make a direct award for 5 plus 2 years under the User Choice provisions was not available under the previous procurement legislation and has only become possible with the flexibilities introduced by the Procurement Act 2023.

Families were informed about this development on 6th January via email, followed by a meeting on 13th January for commissioners to explain the details to the families.

Robust quality assurance processes will be embedded, and there is a shared commitment to maintaining family involvement throughout all stages of the commissioning process.

We are firmly committed to ensuring there is no gap in service provision from 1st October (when the current arrangement ends), guaranteeing continuous support for all individuals and families relying on respite care at Newton House.

Councillor Born thanked all involved, especially the parents and carers.

Councillor Liz Hardman said that she welcomed the good news relating to Newton House and praised all parties for their part in the process undertaken. She asked what lessons have been learnt so that a similar situation does not occur again in the future.

Councillor Born said that there was a recognition now to work more collaboratively with those in receipt of services prior to making a decision about any potential changes.

Councillor Hardman referred to the subject of Adult Regulated Services and asked what was needed for the Community Resource Centres to achieve a 'Good' rating from the CQC.

The Assistant Director for Adult Regulated Services & Governance replied that the CQC inspection at Cleeve Court had an overall score of 62%, which is 1% point below the threshold of 63% for a rating of Good. She added that they were working through their action plan and said that good progress was being made.

She said that a further report could be presented to the Panel in April that would include details of the 'Unexpected Visit' to Combe Lea.

Councillor Hardman asked for the Panel to receive a future report on the South West Good Food Local Benchmarking Exercise.

The Director of Public Health & Prevention replied that this was a cross-Council piece of work, including sustainability and transport, and that she would discuss a report timeframe with colleagues.

Kevin Burnett referred to the Community Support Contracts and the importance of the Voluntary Sector and asked how that was put into practice. He also asked when the next contract round would be due.

Councillor Born replied that there is a fantastic local provision in place through 3SG and that the Council has a close working relationship with them. She added that no advantage had been given to any organisation during the process and that the

Community Wellbeing Hub had also given support to providers. She said that the next contract round would be due in four years' time.

The Executive Director – People added that 3SG are also represented at the Health & Wellbeing Board and engaged in neighbourhood planning.

Kevin Burnett referred to Newton House and asked what hurdles were now left to overcome before October and would the families continue to be involved on an ongoing basis.

Councillor Born said that she was confident that there were no further hurdles as the current provider was onboard with the proposals and said that the families will be kept informed throughout the year.

Kevin Burnett referred to Adult Regulated Services and asked if there was one area of focus for improvement.

The Assistant Director for Adult Regulated Services & Governance replied that this would be Care Planning and that the action plan would highlight that.

Kevin Burnett referred to the Active Wellbeing Big Connect Event and asked is this was connected at all to The Active Way who had given a presentation to the Panel within the last year.

The Director of Public Health & Prevention replied that representatives from The Active Way were in attendance at the event as part of a whole systems approach to improving health and wellbeing. She added that work was ongoing to develop a Neighbourhood Health Plan.

Kevin Burnett asked if an update on Be Well B&NES could be provided to the Panel.

The Director of Public Health & Prevention replied that this could be provided and would expand on elements such as people's behaviour towards physical activity and how they access it.

Councillor Lesley Mansell said that she was shocked at the lack of available named Social Workers as referred to earlier in the meeting. She asked if any comment could be given regarding the ongoing union ballot relating to salaries in the Social Work teams.

The Assistant Director for Operations & Safeguarding replied that while reviews are ongoing a named Social Worker is in place, afterwards there would be a named point of contact.

The Executive Director – People added that conversations were ongoing with ACAS, but were not specifically relating to pay.

Councillor Mansell asked what safeguards are in place to ensure that there is a level playing field for all types of organisations in terms of the Community Support Contracts.

Councillor Born replied that steps were taken during the recent round of contract awards to ensure that smaller organisations were more aware of the process.

Councillor Mansell referred to Child Injury Prevention and asked if the Panel could receive further data regarding this at future meetings.

The Executive Director – People replied that he would seek if this information could be supplied by the Avon Fire & Rescue Service as they were now providing the service referred to.

Councillor Paul Crossley referred to the South West Good Food Local Benchmarking Exercise and said this had the potential for good outcomes if applied properly. He added that he would like the Panel to see some goals and objectives following the conclusion of the process at the end of January.

The Director of Public Health & Prevention replied that this information would inform our Local Food Strategy and suggested that the Panel could receive the survey findings prior to any decision relating to goals and objectives.

Councillor Michael Auton referred to the subject of Supervised Toothbrushing and asked if any areas of B&NES had a low take up and whether any work was also carried out with local dentists.

The Director of Public Health & Prevention replied that she did not have any figures to hand, but could provide them and would seek to find out whether dentists promote the scheme.

Councillor Wright said that she did not think that councillors had been informed about the ACAS discussions and asked how the possible drop in morale would impact their work.

The Executive Director – People said that it was his view that these officers still remain motivated, committed and passionate about their work and that it was a small number who were unhappy with certain terms and conditions.

The Director of Children's Services & Education replied that the majority of staff benefitted through the 'Be Our Best' process, but she was aware that some colleagues were unhappy and that they were working to find solutions to the issues raised.

The Chair asked that the Panel be informed of the outcome of the ballot on its conclusion.

She concluded the item by thanking Councillor Born for her update on behalf of the Panel.

82 2026/27 BUDGET AND FINANCIAL OUTLOOK – DRAFT PROPOSALS

The Executive Director – People introduced the report to the Panel and highlighted the following points.

- The Council's 2026/27 Budget and Council Tax proposal will be considered by Cabinet on 12th February 2026 and presented to Council for approval on 24th February 2026.
- To deliver a balanced budget in 2026/27 savings and income generation plans total £7.49m, with income and savings to find of £32.05m in the following four years covering 2027/28 to 2030/21. The Council has a good track record of delivering proposed savings, in relation to the Cabinet Portfolio's being Scrutinised by this Panel there are savings and income generation plans of £3.20m.
- The proposals for savings and income generation for this Panel's attention are outlined in Annex 1. Growth and pressures to bring to this Panel's attention are outlined in Annex 2.

He stated that it has been a tough process so far as both services are demand led. He said that the Council was committed to maintaining delivery of its high standard services.

He explained that the public consultation on the current budget proposals was to conclude later in the day.

Councillor Alison Born, Cabinet Member for Adult Services said that the Liberal Democrat administration has a history of committing investment into Adult Social Care whilst also seeking potential savings where possible.

She confirmed that contract inflation (£2.6m) and funding of demographic growth (£2m) would form part of the Adult Social Care budget for 2026/27.

She reminded the Panel that Adult Social Care accounts for the largest proportion of the Council's budget and that they continue to be committed to delivering quality services that are also value for money.

Councillor Paul May, Cabinet Member for Children's Services stated that the pressure on the service currently was enormous as demand continues to outstrip resources. He said that he was proud of the support that the Liberal Democrat administration has given to the service over many years.

He explained that the finance of the service is monitored every two weeks and that very good quality of services are in place.

Councillor Liz Hardman asked if the increase in family reunifications and step down from residential placements had been achieved for the current year as this was a highlighted area also for this proposed incoming budget.

The Director of Children's Services & Education replied that the figures for 2025/26 had already been achieved and was based on 10 children being able to return to their homes. She added that this outcome has resulted in achieving a saving of around £500,000 in this financial year.

Councillor Hardman asked if in order to achieve the £300,000 saving associated with transitions into Adult Social Care a dedicated team was required to be recruited.

The Assistant Director for Operations & Safeguarding replied that there is already a transitions team in place within Adult Social Care and that they seek to begin conversations with young people about this process from the age of 16 onwards.

She added that part of this proposal will look at whether any young people from the ages of 18 / 19 can move out of residential accommodation and into reduced dependency models which would lead to a saving on accommodation costs.

Councillor Lesley Mansell asked if there was an update available on the proposed Government White Paper.

The Executive Director – People replied that two pieces of legislation were in progress. The Children's Wellbeing and Schools Bill, to seek to strengthen provision about the safeguarding and welfare of children, this was currently being debated in the House of Lords. And, the Schools White Paper, which was due to set out the Government's planned reforms to the special educational needs and disabilities (SEND) system, this was now expected to be published by the end of January.

Councillor Mansell asked if additional SEND staff will be required to attempt to improve outcomes and monitor EHCP progress.

The Director of Children's Services & Education replied that our prevention approach requires the Council to better front load this work area. She added that Family Hubs are still in place to offer universal help and support and that funding is in place to develop further later in the year.

She stated that a team was now in place to improve the timeliness of applications for an EHCP.

The Director of Education & Safeguarding added that recent work has seen caseloads reduced for individual practitioners to 26, down from 30. He said that complaints relating to SEND have reduced and that teams are working very collaboratively.

Councillor Mansell said that she welcomed these improvements and would like to see information added to the relevant Equalities Impact Assessment. She asked if enough Health Visitors were in place to support the preventative measures planned.

The Director of Education & Safeguarding that he would seek for the Equalities Impact Assessment to be updated and for an update on SEND to be provided to the Panel in March.

The Director of Public Health & Prevention said that she was confident that enough Health Visitors and School Nurses are in place through arrangements made by HCRG.

The Chair asked for the proposed budget savings to be tracked and reported to future meetings of the Panel.

Councillor Paul May replied that the Cabinet Member for Resources regularly reports on budget monitoring to the Corporate PDS Panel and Cabinet and that he would provide such comment within his future updates to this Panel.

Councillor Joanna Wright asked if an explanation could be given for an unaccounted £6m in relation to children's transport in comparison to previous years.

The Executive Director – People replied that the £6m was in connection with the Home to School Transport budget and that this had moved into another directorate of the Council.

Councillor Wright asked if contingency measures were in place should the cost of family setting breakdowns rise.

The Director of Children's Services & Education replied that the budget has been set with the current demand in mind and said that officers will work hard to be able to keep children at their homes for as long as possible. She added that the numbers of Children in Care have been steady within B&NES and are expected to reduce.

Councillor Wright asked if the budget for Legal Services was available to comment upon.

The Executive Director – People replied that this was not within the remit of this Panel, but that he could send that information to her.

Councillor Wright referred to a saving attributable to Technology Enabled Care and asked if this would include Artificial Intelligence (AI) and what impact that would have on data governance and safeguarding.

The Executive Director – People replied that this was not solely about AI although a tool (Magic Notes) has been introduced within the past year to enable conversations during visits to be recorded and transferred into a case file note.

The Assistant Director for Operations & Safeguarding added that a governance process is in place and that consent is sought prior to any recording.

Kevin Burnett asked for further comment to be given in relation to Safety Valve and Charlton House in the context of the budget setting process.

The Executive Director – People replied that Safety Valve funding would be delivered under a separate budget area and added that DfE discussions remain ongoing. He also explained that savings attributable to Charlton House were not due to be seen until 2027/28 and therefore not in this current budget setting timeframe.

Kevin Burnett asked if the Council and the ICB were aligned on how the budget for complex need cases should be shared.

The Executive Director – People replied that there were well established processes in place between the Council and the ICB in relation to complex care packages.

Kevin Burnett asked if enough funding was in place for the work associated with Families First.

The Director of Children's Services & Education replied that confirmation had been received that funding for three years was in place.

Councillor Paul May commented that he would provide the Panel with an update on Home to School Transport via a future Cabinet Member report.

Councillor Wright asked if it was known where and why the demographic growth pressures mentioned (£3.3m) would occur.

The Executive Director – People replied that modelling has been undertaken due to an ageing population.

The Assistant Director for Operations & Safeguarding added that demographic analysis has taken place over the past 2 – 3 years and also takes into account those young people who are likely to transfer into Adult Social Care. She said that also some older people, between the age of 80 – 90, were presenting to the service for the first time.

Councillor Mansell asked if there was a proposed saving that a higher delivery risk.

The Executive Director – People reiterated that it was a challenging budget all round and that he could not single out a specific proposal.

Kevin Burnett asked if any elements of the budget were discretionary or were they all statutory.

The Executive Director – People replied that they were all statutory requirements.

The Chair said that she appreciated the role that both officers and Cabinet Members have played during this process.

The Panel **RESOLVED** to note the proposals that impact the Council's 2026/27 revenue budget.

83 ADULT SOCIAL CARE IMPROVEMENT PLAN

This report was deferred until the April 2026 meeting of the Panel.

84 ADULT SOCIAL CARE ANNUAL COMPLAINTS REPORT

This report was deferred until the April 2026 meeting of the Panel.

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

Lucy Baker, Director of Learning Disability, Autism and Neurodivergence, Children and Young People and the Combined Place Team, BSW ICB introduced the report to the Panel and highlighted the following areas.

- Restructure within the ICB continues and a period of assessing voluntary redundancy is ongoing. A commitment had been made to retaining a dedicated B&NES Place Director.
- During the first full weekend of 2026, each of the region's hospital emergency departments saw a surge in people attending, with the Royal United Hospital in Bath seeing 881 people between Friday 2nd and Sunday 4th January.
- An additional 20 beds have been commissioned at St Martins Hospital in Bath to provide further community capacity between the end of December and the end of March. These beds are now open with good patient flow and clear clinical admission criteria.
- A number of paediatric acute respiratory illness hubs are now up and running across BSW and are helping to provide additional community-based care, while also giving families with poorly children an alternative to hospital. As of Thursday 18th December, a total of 242 children and young people had been seen in one of the new hubs, which will remain in place until the end of February.

Councillor Paul Crossley referred to the uptake of the flu vaccine among health and care workers and said he maintained his view that these figures were still too low and asked if it was known why and whether staff were still being encouraged to be vaccinated.

Lucy Baker replied that figures for the RUH (61%) were above the national (46%) and said that it does continue to be promoted. She said that she would seek what information could be obtained from acute providers.

Councillor Joanna Wright stated that she was still awaiting a response from the ICB from questions relating to abortion and contraception figures.

Lucy Baker replied that she was aware that a response has been sought and would aim for it to be provided at the next meeting.

Councillor David Harding asked for assurance that rural areas would also be included in the proposed work of the Mobile Dental Clinics.

Lucy Baker replied that the aim will be to provide access to services where it is currently difficult to access. She added that the procurement process for the Clinics was just beginning.

Councillor Onkar Saini referred to the new mental health inpatient unit for people with a learning disability and/or autism and asked if staff have been recruited for the unit.

Lucy Baker replied that all posts have been recruited by AWP, including a dedicated outreach team.

Councillor Liz Hardman commented that the NHS capacity update was welcome and asked if the points mentioned in the update would continue after February.

Lucy Baker replied that the additional beds at St Martins Hospital would remain in place until the end of March, the paediatric respiratory hubs would continue until after February half term and that Hospital at Home would continue with its increased capacity.

Councillor Lesley Mansell said that she hoped that being shortlisted for an award would lead to further coproduction at the new mental health inpatient unit for people with a learning disability and/or autism and other future projects / work areas.

Lucy Baker replied that public involvement at the Kingfisher is intended to continue.

Councillor Mansell asked if the vaccination teams have used the Equalities Impact Assessment (EIA) process to find out more information relating to take up. She also asked for EIAs carried out by the ICB to be published on their website.

Lucy Baker replied that she would relay this info and request to the relevant teams within the ICB.

Councillor Mansell asked if the results of the RUH Accident & Emergency usage survey were yet available.

Lucy Baker replied that she was sure that a summary of the survey results could be provided to the Panel.

The Chair asked if the RUH was experiencing the same levels of 'corridor care' as was being reported nationally.

Lucy Baker replied that yes, on some occasions it has. She added that risk is analysed on each individual basis and that daily conversations are held across the system regarding the issue.

The Chair thanked Lucy for the update and attending the meeting on behalf of the Panel.

86 PANEL WORKPLAN

Councillor Joanna Wright asked when the Panel would be updated on the previously mentioned cross-Panel issues, such as School Streets and Home to School Transport.

The Chair replied that it remains her intention to discuss this further at the next meeting of the Chairs & Vice-Chairs of all three Panels.

The Panel reviewed the workplan, noting items to be brought forward, including:

- Procurement processes for both Adult Social Care and Public Health
- ASC Joint Funding Process
- Coproduction between the Council and the ICB
- Results of the South West Good Food Local Benchmarking Exercise
- Academy Management – Update on schools and their partnership / MAT
- EHCP Update
- Annual SACRE Report

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

Before the meeting closed the Chair took the opportunity to thank Becky Reynolds, Director of Public Health & Prevention for all her work for the Council as this had been her final Panel meeting before retirement.

The meeting ended at 12.20 pm

Chair(person)

Date Confirmed and Signed

Prepared by Democratic Services

Statement to Adult Scrutiny Committee (19.01.25) Cindy Carter

Chair, Members of the Committee,

Thank you for the opportunity to speak today. I am here in my capacity as a Court of Protection appointed Joint and Several Deputy for a young man who has a profound learning disability and complex health care needs living in B&NES, and also as his Mum.

I recognise that the Council is operating in a challenging financial and operational environment, and I appreciate the difficult decisions adult social care faces. The current consultation proposes achieving savings through future recommissioning of learning disability services and through Care Act reviews with a stronger focus on cost-effectiveness. While these are described as efficiency measures, for people with learning disabilities—especially those with profound and complex needs—they have real consequences for how care is commissioned, reviewed, and delivered.

For people like my son, care is not optional or flexible. It relies on stable providers, skilled staff, and consistent, trusted support. Cost-driven changes can reduce staffing levels, lower skill mixes, disrupt continuity, or destabilise providers. These are not abstract concerns: they can lead to safeguarding risks, deterioration in health, loss of skills, and more restrictive support rather than greater independence.

A key concern is timing. Savings are being consulted on now, while the recommissioning framework shaping future services is still in early development and expected to evolve through 2026. I would welcome reassurance from the Committee on how outcomes for people with learning disabilities will be protected when the framework is not yet in place.

People with learning disabilities are a protected group under the Equality Act. An Equality Impact Assessment has been completed, but it is based on broad intentions rather than detailed proposals. Small changes in commissioning or review practices can have disproportionately large impacts, so careful mitigation is essential as proposals develop.

Co-production is a statutory requirement under the Care Act 2014. At present, there has been limited meaningful involvement of people with learning

disabilities, their families, or Court-appointed deputies. Strengthening engagement would help ensure decisions reflect how services work in practice, supporting continuity and stability for those most affected. We welcome the Council's confirmation in recent correspondence that it would work co-productively on these proposals.

There are positive local examples to build on. The commissioning of respite provision at Newton House has shown the value of co-production, user choice, and continuity of care. I encourage the Council and the Committee to apply these lessons to the recommissioning of supported living services, so future models are shaped by lived experience and deliver the stability, quality, and outcomes that matter most to individuals and families.

Thank you for your time and consideration.

Statement to Adult Scrutiny Committee (19.01.25) Alan Carter

Chair, Members of the Committee,

Thank you for the opportunity to speak. I am here as a Dad and as Court of Protection appointed Joint and Several Deputy for my son, who has a profound learning disability and complex health care needs. He lives in supported living and relies on commissioned care and support to meet his needs safely and lawfully.

The Committee will be considering proposed local authority budget proposals, which include changes affecting people with learning disabilities through care package reviews and the recommissioning of services. These proposals sit alongside financial pressures within the Integrated Care Board, which also impact learning disability services.

In this context, we are seeing challenges between B&NES Council and BSW ICB in determining which organisation is responsible for meeting assessed needs under the Care Act. These are not abstract issues—they arise in day-to-day care planning. While funding responsibilities are clarified:

- Care can be delayed or questioned,
- Families and deputies are placed in the position of helping resolve funding disputes between B&NES Council and BSW ICB, causing uncertainty and stress,
- And people with learning disabilities may face increased risk.

The law is clear: Care Act assessed needs must be met, and funding disagreements must not disrupt care. We recognise the pressures on both organisations, but these duties remain critical and statutory.

We would encourage the Committee to consider not only the cumulative impact of proposed budget changes on people with learning disabilities, particularly those living on the minimum income guarantee, which is below the poverty line, but also the potential equality impacts on those with profound learning disabilities and complex health care needs. It is equally important to consider how joint working between the local authority and ICB can be strengthened so that care delivery is not adversely affected.

Specifically, we would ask the Committee to explore:

- How joint responsibilities are defined and consistently applied,
- What mechanisms exist to resolve disputes without impacting care,
- And what assurances can be given that people with learning disabilities are not left with unmet statutory needs due to cost-shifting.

This is not simply a financial issue—it is about ensuring that public bodies work together effectively to uphold their legal and ethical duties to some of our most vulnerable citizens. By approaching these challenges collaboratively, we can ensure that care remains safe, reliable, and person-centred.

Thank you for your time and consideration.