

Appendix 1

Community Equipment Service and Minor Adaptations Services Options Appraisal

1. Background / Statutory Considerations and Basis for Proposal

Currently the delivery of Community Equipment Services (inc. Minor Adaptations) within B&NES is covered by two separate contracts. The main community equipment service contract provided by Sirona Care and Health CIC covers the loaning, delivery, collection, recycling and maintenance of a range of health and social care equipment including hospital beds, pressure relieving mattresses, commodes and walking aids. The cost for the provision of this service is £215,250K per annum and is drawn from the pooled adult equipment budget of £675k. The minor adaptations contract is provided by We Care Home Improvements and covers the installation of a range of minor adaptations to people's homes including key-safes and grab rails. The cost for the provision of this service, inclusive of staff and materials is £90k per annum and is funded from the Disabilities Funding Grant (DFG).

Community Equipment Services in B&NES was the subject of a light touch review in 2017; this was to map equipment provision as there was insufficient information and data available at that time on which to base an options appraisal for future provision. Whilst the review showed no major concerns with service provision, some minor issues were identified relating to disparate ordering processes, lack of clarity around legislative maintenance schedules, oversight of stock and incomplete data in the respect of activity/performance. As these minor issues were not affecting service provision, it was therefore not considered a priority area for further in-depth review at that time.

Specific lead commissioning oversight was put in place towards the end of 2018, however, due to gaps in expertise and knowledge in the commissioning team in relation to the service, the then B&NES Joint Commissioning Committee (JCC) approved the recruitment of a fixed-term specialist Occupational Therapist in April 2019. The post holder worked with the Integrated Adults Commissioning Team (IACT) to support the resolution of the minor issues identified during the 2017 review. These included disparate ordering processes, lack of clarity around legislative maintenance schedules and stock/data oversight. These minor issues prevented capture of an accurate picture of activity, performance and stock levels that in turn would have presented a risk of unpredictable financial consequences in relation to any future procurement exercise. Initial recruitment processes saw only one interested applicant who did not have Occupational Therapy or Community Equipment experience. A subsequent recruitment process was successful and the post was recruited to with a start date of May 2020 for this role.

As current contracts were due to expire at the end of March 2020, a further paper was submitted to JCC in October 2019 detailing the current position of community equipment within B&NES and the outcome of significant provider and service user engagement. This paper defined an often complex and disparate picture of service understanding from a commissioner point of view and thus sought approval for a 24 month extension to the contract with Sirona Care and Health to allow additional time for the review to continue and enable the full consideration of all potential long term options, including possible alignment with the Minor Adaptations contract. The request to extend was approved.

Since this paper, significant progress has been made in understanding the picture of Community Equipment provision in B&NES and a number of the minor issues identified during initial review have been resolved. To date this includes a full check of compliance against legislation in relation to lifting equipment, a review of 'special stock' orders, a review of all items of equipment held in the main store including disposal of items no longer fit for purpose. Progress is now being made to review the list of standard stock items of equipment. Work was progressed with Sirona to implement a new on-line ordering system that would have enabled more robust data collection, stock audit and stock control. However, due to the COVID 19 pandemic, this work has unfortunately been delayed until early 2021 and thus commissioners and Sirona have been unable to fully develop data feeds that give an accurate and complete picture of equipment provision, stock levels and activity and performance within B&NES. As such, the data currently received does not cover all commissioner requirements at this time. Section 3 provides an overview of the performance data currently received.

Aside from the Sirona Community Equipment contract, work has been undertaken to review the contract for the Minor Adaptations Service (MAS) and approval was given by the Council's Contract Panel to extend this for a further 12 month period so it aligns with the current end date of the Community Equipment Services contract (March 2022). The purpose of this alignment is to allow commissioners to fully consider the pros and cons of bringing both services together; with this explored in further detail in Section 6.

The provision of CES and MAS via a block contract in B&NES is not typical when compared with other local areas such as Wiltshire, which sees CES and MAS commissioned as one complete service via credit and activity models. As the CES and MAS contracts in B&NES expire at the end of March 2022, B&NES could use this opportunity to simplify the commissioning and future contract management of these services. The information set out in this paper aims to describe in detail the current commissioning of CES and MAS in B&NES and highlights potential long term options for both services, their associated risks and mitigations and asks SLT to approve the recommended option.

2. Models of Delivery

When considering the main community equipment contract held with Sirona, the B&NES model of delivery is distinct to a number of our neighbouring authorities in that it is commissioned via a block activity contract. Conversely, the model seen in Wiltshire and

Bristol, North Somerset & South Gloucestershire (BNSSG), is a credit and activity model which is now considered standard within the community equipment provider market nationally. The table below further outlines the types of contract delivery and their implications in further detail:-

MODEL	FUNDING/OWNERSHIP ARRANGEMENTS	IMPLICATIONS
Block Contract (current model)	<ul style="list-style-type: none"> • Fixed management fee paid to the provider to cover all activity. • Each item of equipment is separately paid for and fully owned by the commissioner • Premises can be requested as part of procurement process but currently it is owned by the Council with rent and utility charges being drawn from the pooled budget 	<ul style="list-style-type: none"> • Commissioners have greater control over activity costs with providers carrying the initial risk if activity is over plan. Requires activity data to be accurate when procuring to agree contract value, with equipment prescriber behaviour having limited day to day cost impact. • Commissioners' equipment costs and assets will be for both items on loan in the community and those in the store. • Commissioners only pay the list price for a single item of equipment once, which can be recycled until the item is scrapped.
Credit and Activity (model used by the majority of authorities)	<ul style="list-style-type: none"> • Commissioners pay for each agreed activity (collection, delivery, maintenance, repair, servicing etc). • Commissioners pay up front for each item of equipment and own it whilst it is on loan but are then credited at an agreed percentage (typically 80% of the purchase price) for each item returned from loan upon which ownership returns to the provider. • Providers typically provide premises including costs of all utility charges and costs are usually made up within activity charges 	<ul style="list-style-type: none"> • Commissioners may have limited control over activity costs initially. Requires activity data to be accurate to forecast costs, with prescriber behaviour having a very significant day to day cost impact unless well controlled by the Commissioners • Commissioners' equipment costs and assets will only be for items on loan in the community. • Commissioners pay the list price each time an item is issued on loan, with this being credited at an agreed rate where recycled and returned to the warehouse in a reusable condition.

Whilst the above covers the main equipment service contract, in relation to the MAS contract this is currently delivered on a full block contract basis in which both the activity and equipment (materials costs) are covered by the block arrangement due to the size and relatively low cost of the service being delivered.

3. Service Activity Data

The summaries below outline the activity data associated with both the Community Equipment and Minor Adaptation Contracts.

Community Equipment Service 2019-20

Activity	Equipment Orders
<p>2019-20 saw an average of:-</p> <p>882 items of equipment delivered per month within the following timescales:-</p> <p>36% delivered within 1 day 46% delivered within 4 days 16% delivered within 7 days</p> <p>776 items of equipment collected each month within the following timescales:</p> <p>24% collected within 1 day 58% collected within 4 days 10% collected within 7 days</p> <p>Overall, the service is meeting its contracted indicator timescales for delivery of 95% of requests within 7 days, with this being met in an average of 97.5% of deliveries in 2019/20.</p> <p>Additionally, 96% of items returned to the store were recycled and reissued, with only 4% requiring disposal.</p>	<p>The top 3 items of equipment ordered in 2019-20 were:</p> <p>High Dependency Cushions = 233 Toilet Frames with seats = 279 Perching Stools = 266</p>

Minor Adaptations Service 2019-20

Activity	Adaptations Installed
<p>2019-20 saw an average of 174 jobs completed per month (against a target of 177) delivered within the following timescales:</p> <p>60% of internal installations completed within 5 days (target = 80%) 79% of external installations completed within 15 days (target = 80%)</p>	<p>In 2019-20 the following minor adaptations were installed most frequently:</p> <p>Grab Rails = 877 External hand rails = 374 Mopstick/Stair rails = 296</p>

Whilst the above provides a snapshot of the activity associated with the contracts, it does not adequately cover commissioner requirements specifically in relation to the Community Equipment data as we are unable to accurately determine performance in relation to a number of areas e.g. the delivery timescales requested by the prescriber (24hrs, 4days or 7 days). Currently the OT Lead working with the Community Equipment Service is undertaking manual audit checks with prescribers in relation to referrals for equipment and timescales requested for delivery. It is also not currently possible to determine a complete accurate picture of maintenance activity data such as PAT testing and mobile hoist servicing. This is in part due to the impact of Covid in conjunction with a delay in the planned implementation of the new online ordering system, resolutions for which are currently being investigated and we hope to have a workable solution that will enable robust data collection and stock audits by May/June 2021.

As such, comparable modelling and understanding the risks of moving from the current block contract model to a credit and activity model has proved challenging due to data uncertainty. Where other areas have moved from a block model to a credit and activity model, significant cost increases have been seen where robust data and/or robust prescriber governance was not fully in place. Therefore, going to the market with data as it is will likely result in the market factoring in additional costs due to the uncertainty/risk of our data being incorrect. It is highly likely that this financial risk will be passed back to the commissioners

Alongside the activity and purchasing costs associated with moving to a credit and activity model, consideration needs to be given as to whether existing stock would transfer to a new provider or whether it will be written off during service transfer and thus on the current contracting arrangement would result in a loss of assets belonging to the Council. Current data suggests there is an estimated value of £3.1M* worth of equipment on loan with service users in B&NES, with a further £127k* held between the main store and the 6 satellite stores located in Radstock x 2, Keynsham, Midsomer Norton, Paulton and Chew Valley Medical Practice (*figures currently based on new purchase costs and thus do not account for depreciation at this time). Further detail of these values can be seen at Appendix 4. It is however worth noting this data should be viewed with significant caution

and further in depth data cleansing and asset tracking will be required in the future as part of the new on-line ordering system.

4. Funding/Costs

Community Equipment Services are funded from a pooled budget with a 70/30 split between the CCG and the Council respectively. The budget of £675k is managed by the Council and covers the costs of the contract with Sirona Care and Health CIC who provide the service at a contract cost of £215k. Elements of the remaining £460k covers rent, utilities, telephone services and refuse collection. In 2019-20, of the remaining budget of £421k (after utility costs) which was available to purchase standard stock and specialist equipment, the total spend on standard stock and special order items of equipment was £425k.

Separately, following agreement in 2019-20, the Minor Adaptations Service has been funded via the Disabilities Facilities Grant (DFG) at a cost of £90k and is provided by We Care Home Improvements. There is also an additional contribution, by way of a capital funding grant, of £40k from the DFG for high cost ceiling track hoists, of which £34k was spent. Such agreements have continued in 2020-21 and have enabled the community equipment pooled budget of £675k to remain balanced. However, without this subsidy, the community equipment pooled budget would have overspent due to increased demand associated with an ageing population with higher care needs but also because the budget of £675k has not been uplifted for a number of years to keep up with rising equipment costs, demographic change or inflation.

5. Engagement

In January 2019, commissioners undertook engagement with a range of stakeholders including service users, equipment prescribers and potential providers of services.

For service users and prescribers a survey was sent out in 2019 which enabled evaluation of the current service model. Feedback from the survey from 82 users of the service has been summarised below:

- The service is highly thought of by users and prescribers
- Staff members within the service were commended by users and prescribers for 'going the extra mile' to ensure a person-centred service was provided
- Flexibility, friendliness and knowledge of the staff was clear
- Equipment arrives quickly and is in good condition
- No complaints have been received about the service
- There was a request for more public information about what equipment is available and how to access it and work is planned to address this with the communications and marketing team from Sirona Care and Health CIC

Feedback from the survey from 30 prescribers has been summarised below:

- Staff within the CES are flexible, helpful and knowledgeable
- There was a request for information regarding the progress of orders, to be made aware when orders had been delivered and to be advised if an alternative product was being sent due to no stock of requested item. It was suggested this can be done via a more developed online ordering system.
- Inefficiencies relating to a separate community equipment and minor adaptation contract in relation to separate performance reporting and monitoring, duplicate contract management performance meetings and separate contract negotiations.

In the respect of provider engagement, commissioners undertook an engagement event in 2019 attended by Sirona Care and Health CIC, Mediquip, NRS and Millbrook, all of whom were informed of commissioner's current plans and background to provision within B&NES. The procurement team then followed up with 1:1 discussions with those providers who expressed an interest in future provision of the service at the event. Finally, during Quarter 3 2020/21, further 1:1 discussions have taken place with those providers and the outcomes of those meetings have been summarised below. All 3 organisations:

- Commented on the low cost of community equipment spend when comparing against areas with similar population numbers and questioned if this was representative of very good value for money or if actual need was not being met
- Predicted an expected average spend of £2M to cover equipment and contract costs given the population size against our current budget of £675k.
- Favour credit and activity models, some will not bid for block but may challenge if a procurement exercise is for a block contract only as they see this as exclusive, others will bid if the price is right
- Requested more detailed data to furnish their decision making processes and noted incomplete data is where a challenge may occur e.g. if activity more than block contract, this will result in requests for more funding or incomplete data provided as part of a procurement exercise may result in a challenge
- Suggested cost savings in relation to economy of scale purchasing power, however couldn't explicitly demonstrate this.
- Expressed an interest in providing services in the B&NES area from a strategic point of view

6. Combined Contracting Considerations

As noted previously commissioners have explored the option of bringing Community Equipment Services and Minor Adaptations Services together. Whilst they are similar in aim and objectives they have historically been provided via separate contracts and there is currently no common working relationship between the two service providers despite often being required to provide similar types of support. It is of note that some local areas do commission these services separately (Bristol and North Somerset) and some commission them together (Wiltshire).

As the Minor Adaptations Service is commissioned via a relatively simple low value block contract, consideration needs to be given as to which option represents the most cost

effective, efficient and safe way to provide this service going forward but also consider the coordination/service delivery benefits of bringing the services together.

Commissioning the services together may allow a more integrated and effective provision, in which service users may only require one visit to provide equipment and undertake a minor adaptation as opposed to multiple visits from individual providers. It will also negate the need for duplicate contract performance meetings, duplicate data interpretation and duplicate contract negotiations. It is estimated that 90% of individuals requiring minor adaptations are already in receipt of community equipment. Additionally, having an integrated contract could reduce contract oversight and management requirements with commissioners only having a single contract to manage. Finally, it could be argued that aligning both services could represent an increase in service capacity if the skill mix and job requirements were well co-ordinated.

Conversely it may be that procuring the Minor Adaptations service via a simple block contract could represent a much more cost effective contractual arrangement than bringing it in house or including it as part of the Community Equipment service. Procuring MAS will provide time for the CES to safely transition to in-house provision, settle into new working arrangements and become fully embedded. There will be a requirement of more commissioner, procurement, finance and management oversight to manage the contract, as is the case currently, however despite this it may be that the costs of procuring MAS on a separate and simplified works contract represents the best value for money albeit that would have to be tested through an appropriate procurement process.

7. Summary

To summarise, as both contracts expire at the end of March 2022, the longer term options now need to be considered to allow a period of 12 months to implement the most appropriate model and ensure all risks and mitigations have been fully assessed. Considering the views of users and prescribers, it is clear that the current service models, whilst complex and disparate, represent good value for money and work well for the population of B&NES in the way in which they are currently delivered. Taking into account the predicted financial implications of adopting a credit and activity model (see appendix 5) and the high levels of staff resource required to undertake a procurement exercise, it is clear that a decision is now required in the respect of the future commissioning of these services balanced on the considerations given throughout this paper.

Due to the nature of this paper, we will need Cabinet to consider the options available for CES and MAS and subsequently the type of model needed to deliver this:-

Combined Contractual Options

REJECTED: Commission as a combined service

- Whilst this may represent efficiencies in the reduction of duplicate visits to deliver equipment/make an adaptation, it is suggested greater financial value will likely be found in commissioning MAS as a simple works contract at this time.

RECOMMENDED: Commission as separate services

- Likely to ensure best value for money for both services at this time and will allow the recommended decision for CES to be enacted and stabilised before consideration is given to bringing the services together.

Model Options

- a. **REJECTED:** Publish a PIN and undertake a procurement exercise for the Community Equipment Service and the Minor Adaptations Service as separate Block Contracts for 4 (+2) years

- Early conversations with organisations who expressed an interest in any future procurement of community equipment services in B&NES, confirmed that they would not proceed with expressions of interest for a block contract at the current indicated contract cost which as previously noted in section 5, was thought to be extremely low given the population of B&NES
- Whilst likely to allow certainty over costs, procuring both services as a single block contract is likely to attract limited interest as most providers favour credit and activity models. This option also carries the risk of a challenge from the market based on limiting the type of contract to a block
- Gaps in data may result in providers requesting additional funding if activity is higher than initially predicted
- A high level of staff resource from Commercial Managers, Finance, Procurement and Project Management will be required to undertake a procurement exercise for CES and any potential challenge received with limited commissioning capacity to oversee this
- Possible disruption to service provision which appears to be well regarded by prescribers and service users.

- b. **REJECTED:** Publish a PIN and undertake a procurement exercise for the Community Equipment Service as a Credit and Activity model for 4 (+ 2 years) and MAS as a block contract.

- Adopting a credit and activity model carries a high risk of an unpredictable increase in costs. When calculated using data representing just the top 10 items of equipment issued in B&NES against anticipated activity costs, this could represent an increase in costs of up to 90% (720k) in the first year and could potentially be higher if calculations were made incorporating all items of equipment. This appears supported by the fact that all 3 interested providers thought spend of £2M was more realistic for the population of B&NES. It is of note that costs would decrease as we moved through a contracting period as items are credited, however it is estimated costs will likely still be significantly above what is currently spent in B&NES.
- Again, data discrepancies significantly increase the risk of a challenge alongside predicted cost increases

- Again, similar to Option a. a high level of staff resource will be required at a time of stretched capacity to procure CES.
- Possible disruption to service provision which appears to be well regarded by prescribers and service users.

c. **RECOMMENDED:** Bring the Community Equipment Service in house and procure the Minor Adaptations Service.

The preferred option is c. based on the reasons set out below:

- Procuring the Minor Adaptations Service will allow sufficient time to concentrate solely on the transition of the Community Equipment Service to in-house provision, ensuring the service is safely embedded and working well
- Minimal disruption to service provision anticipated with the Community Equipment team likely to TUPE providing experience and knowledge of products/materials and the geography of B&NES
- Greater certainty of costs, further detailed in Section 5, when compared to other options
- Greater control over performance and spend and the provision of accurate data reporting, impacting positively on prescriber behaviour

8. Resource Implications

The overall cost of the current Community Equipment contract with Sirona Care and Health is currently £215, 250.00 per annum, although it should be noted that Sirona have referenced this is not a full costs recoverable contract value and they are currently subsidising this by around £20k-£40k per annum. The remaining £460, 000 sits within the pooled CCG and Council budget and is managed by the council. This covers utility costs and equipment (£675k in total) and is split 70/30 CCG and Council respectively. In addition, following agreement in 2019-20, the Minor Adaptations Service has been funded via the Disabilities Facilities Grant (DFG) at a cost of £90k and is provided by We Care Home Improvements.

CES Costs

Commissioners have worked extensively with finance colleagues to calculate the anticipated full overall costs of bringing the CES service in house and a summary of the anticipated costings across the period 2022 – 2025 is provided in the table below with detailed calculations attached at Appendix 2:-

CURRENT BUDGET	IN HOUSE PREDICTED SPEND YEAR 1	IN HOUSE PREDICTED SPEND YEAR 2	IN HOUSE PREDICTED SPEND YEAR 3	IN HOUSE PREDICTED SPEND YEAR 4
£675K (£215k Sirona Contract + £460k Equipment Budget)	£753K (Increase of £78K attributable to pension liabilities)	£753K	£768K	£783K
+ Contingency in Year 1	£15K			
Inflationary equipment uplift from Year 2 onwards		£15K	£15K	£15K
NEW TOTAL	£768K	£768K	£783K	£798K
CCG contribution (70%)	£537,600	£537,600	£548,100	£558,600
Council contribution (30%)	£230,400	£230,400	£234,900	£239,400

It is important to note that there may also be additional cost pressures in the market in relation to COVID and Brexit affecting sourcing and costs of equipment. As the pooled equipment budget has not received any inflationary uplifts in previous years, details of an uplift of around 2% has been added to progressive years to ensure budgets are reflective of the increased demand of an ageing population with higher care needs and to keep up with possible cost increases/inflation.

It is also of note that the current community equipment council owned store requires remedial works to ensure it remains fit for purpose. The cost of this has not been included within this paper as it has not been possible to obtain quotes for the full cost of all repairs required at this time; this risk is detailed further in section 7. An options appraisal regarding the future location of the equipment store will be required to weigh up remedial works versus relocation to an alternative site.

Finally, it is recognised there will be an ongoing requirement of strategic leadership and management responsibility and requirements on the finance team and procurement team in the respect of the future sourcing, ordering and purchasing of items of community equipment. The resource requirements of this will need to be determined during the transfer process. Such costs are reflected in the contingency in year 1 whilst they are determined and confirmed.

MAS Costs

The cost of the current block contract for Minor Adaptations is £90k per annum and is currently funded via the DFG. To procure this service via a simple block works contract it is suggested an indicative block amount of £90k be anticipated post procurement and recurrently included as part of the DFG budget (with inflationary uplifts in line with other Council service contracts). However, to allow for contingency during procurement it is suggested an additional 10% contingency is included in year 1 and thus the total call on the DFG will be £99k.

9. Consultation

Users, prescribers and prospective providers have been part of an extensive engagement exercise. Further details are provided in Section 5, Engagement.

This paper and the options within has been reviewed and approved at the Councils Contracts Panel, Single Leadership Team, Locality Commissioning Group and by Cllr Alison Born, Cllr Richard Samuel, Cllr Rob Appleyard, Monitoring Officer Michael Hewitt and the S151 Officer Andy Rothery all who have agreed clearance for this to move to a single member decision.

10. Risk Management

The following risks and mitigations have been noted in regards to the recommended Option C:

- In the short to medium term, significant input from Commissioning, Procurement, HR and Finance teams will be required to undertake the in housing and procurement process. To mitigate this, a request has been included as part of the BCF (DFG element) to fund a 0.5 WTE project manager to support the project over the coming financial year.
- In the longer term, procurement and commercial directorates will need to support on an ongoing basis to ensure the purchasing of equipment aligns with procurement legislation. The annual spend on equipment exceeds the Procurement Thresholds, so the Council will need to establish some compliant contracts or use of compliant frameworks for sourcing of equipment. Procurement resource will be needed at the outset to establish these arrangements and there will be ongoing resource implications in respect of ordering equipment and ensuring best value. This role is currently performed by a central team within Sirona Care and Health, rather than by the roles that would be deemed eligible for TUPE. The Council does not currently have a buying team that could subsume this work and thus as noted in Section 5 the resource requirements of this will need to be determined during the transfer process and is reflective of the contingency built in to the budget model in year 1 whilst this is determined.
- Loss of the experienced Occupational Therapist lead for Community Equipment when the period of secondment ends in May 2021. The mitigation of this is the now confirmed extension of a further 12 months to support the safe transition of services
- Lack of comprehensive data due to issues with the implementation of the new on-line ordering system. The mitigation of this is that conversations are taking place to identify alternative routes to host the new on-line system, either with the owners of the software system which comes at an additional annual cost or with the council directly via their server
- Timescales risk. It has been calculated that a period of 12 months will be required to fully implement this option. If approval is given by Cabinet members in May 2021,

this will impact on the required 12 month implementation timescale. The mitigation of this would be to issue a short term extension to the existing contract with Sirona Care and Health CIC for Community Equipment provision and We Care Home Improvements for Minor Adaptations provision of around 6 months, shifting the end date of both contracts to September 2022. As such, this paper also requests approval from SLT for up to a 6 month extension to the current contracts for CES and MAS (April 2022 – September 2022) to ensure the required period of 12 months from the date of contract notices being given to the date services transfer, to facilitate the implementation of all essential actions set out in the project plan.

- Unidentified financial costs relating to the funding of the Community Equipment Service due to the complex way in which the service is commissioned and incomplete data. The mitigation of this would be the contingency in year 1 followed by uplifts in subsequent years.
- Premises are currently not fit for purpose and are provided as part of the Council's estate at Radstock Road. As such, there will be a need for either significant remedial works to the current structure or the relocation of the store site. However, at the time of writing, the implications of this including associated costs has yet to be determined. Therefore, it is recommended that a full options appraisal for this is developed, in conjunction with property services, to identify longer term plans and potential capital funding requirements.

8. Next Steps

- 8.1 A single member decision will be made following the Councils Democratic Services single member decision process. Once the 5 day standstill period has passed, implementation of the steps set out in the project plan attached at Appendix 3 will be required.

Equality and Diversity	Applicable		Not applicable	
This change has no impact on equity and diversity and would continue to offer an equitable service.				
Health Inequalities Assessment	Applicable		Not applicable	
The recommended approach offers a comprehensive service across B&NES ensuring that all residents are supported with the relevant assessments and equipment and adaptations.				
Public and Patient Engagement	Applicable		Not applicable	
Please see the consultation processes noted in section 5.				

Do not embed documents / appendices; submit these separately as individual documents

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