

Bath & North East Somerset Council		
MEETING/ DECISION MAKER:	Children’s, Adults, Health and Wellbeing Policy Development and Scrutiny Panel	
MEETING/ DECISION DATE:	17 th November 2025	EXECUTIVE FORWARD PLAN REFERENCE:
TITLE:	Adult Social Care Residential Services update for Community Resource Centres and Extra Care Services	
WARD:	All	
AN OPEN PUBLIC ITEM		
<p>List of attachments to this report:</p> <p>Attachment 1: Service Plan Priorities</p> <p>Attachment 2: Management Structure</p> <p>Attachment 3: Service CQC Ratings</p> <p>Attachment 4: Mandatory Training List</p>		

1 THE ISSUE

- 1.1 This report outlines the service priorities for residential services and our commitment to continuous improvement of services to meet the needs of residents. The report provides an update on bed utilisation, governance and assurance, staffing, health safety and wellbeing, property and regulatory compliance.
- 1.2 Adults Regulated Services include two Community Resource Centres (CRC's - Cleeve Court and Combe Lea - Residential Care Homes) and five Extra Care Housing Schemes across B&NES. Cleeve Court is a two floor 45 bed residential care home located in Twerton, Bath for older people with dementia and Combe Lea is a two floor 30 bed residential care home located in Midsomer Norton for older people with a range of physical disabilities and dementia support.
- 1.3 Extra Care is provided across 5 service locations (Avondown House, St Johns Court, Hawthorns Court, Greenacres Court and The Orchard). Extra Care services offer housing designed for individuals who value both independence and access to support services. It provides self contained accommodation (resident holds a tenancy agreement with a housing provider) that enable

residents to maintain a high levels of self-care with the added benefit of onsite support. This offers B&NES residents the freedom and privacy of independent living within a supportive community by combining the independence of a private home with the security of a care facility. A dedicated care team run by ASC is available in each Extra Care service 24/7 to provide scheduled care visits and respond to emergencies. These communities also promote social inclusion by offering shared communal spaces for social engagement, along with a daily two-course midday meal. The occupancy rate in Extra Care is 99% and there is a need for ASC to further invest in more Extra Care provision for older people as part of our Independence Strategy.

- 1.4 The Stepdown service is delivered in partnership with Curo as a social housing landlord. There are six stepdown flats at two Extra Care sites (Hawthorn Court and St John's Court).
- 1.5 The Stepdown service provides short term (up to 12 weeks) accommodation with care to people who are at risk of hospital admission or who are medically fit to leave hospital but are not ready to return to independent living. During an individual's stay, the Stepdown service will provide a reablement programme and support an assessment that will clarify ongoing care needs.
- 1.6 Since 2017, the Community Resource Centres and Extra Care services had been part of the Integrated Community Health and Social Care contract with Virgin Care Services Limited, but they were sub-contracted to Sirona Health and Care. The services returned to be directly delivered by B&NES Council in 2020, following the decision by Sirona Care & Health to cease delivery of that contract.

2 RECOMMENDATION

The Panel is asked to;

- 2.1 Note the update on Residential Services for Community Resource Centres (care homes) and Extra Care Services and provide feedback to inform continuous improvement.
- 2.2 Agree that a further update report will be presented to panel following the publication of the CQC report for Cleeve Court and any other relevant CQC inspection reports as they arise.

3 THE REPORT

3.1 Service Priorities

- 3.1.1 As part of the annual service planning process Residential Services have identified the following priorities (Attachment 1) which demonstrate our ongoing commitment to the B&NES Corporate Strategy (three principles):

- deliver high standards of care
- delivery of ambitious improvement plans
- support to our residents

3.2 Adult Regulated Services Bed Provision and Occupancy

3.2.1 Occupancy rate is 97% across Residential Services. Bed utilisation is monitored and reported at the Provider Services Quality and Performance Meeting and directorate finance meeting. The service works closely with the Brokerage Team and ASC Operations team to consider referrals into the services. Both CRCs are regularly contacted by Brokerage (or directly by Social Worker or Safeguarding Team managers), to source emergency respite or bed of safety. Residential services are quick to respond with help and admission, often at very short notice, and admission often takes place the same day/evening if we can accommodate. Currently 1 respite bed is utilised at Combe Lea and 1 respite bed and 4 D2A residents utilised at Cleeve Court.

A recent example of respite is a female resident who was placed at short notice in Cleeve Court following a breakdown in her relationship with her husband, both of whom had dementia. During her emergency respite stay, she expressed concern for her husband, who was on an end-of-life pathway. The service worked with their daughter to arrange for him to move into the room next door, allowing the couple to reunite for his final days. He passed away peacefully with his wife and daughter by his side. The service provided compassionate support to their daughter throughout this time.

3.3 Management Team

3.3.1 The Adult Regulated Services management team are highly knowledgeable and skilled with many years of experience working in older people's residential services. They demonstrate commitment, compassion and focus on the delivery of good outcomes for residents. The management of Extra Care and Combe Lea care home has been stable for some time. The Adult Regulated Services management structure chart can be reviewed in Attachment 2.

3.3.2 A new Registered Manager has recently been appointed for Cleeve Court and came into post in September 2025. The new Registered Manager is in the process of applying to CQC as per registration requirements and is fully engaged in an induction programme.

3.4 Commitment to Continuous Improvement

3.4.1 An independent provider has been commissioned to undertake unannounced mock inspection visits to both CRC's and each Extra Care service over the last year. A summary of the mock inspection feedback has been received by each service and included in the service's continual CQC action plan. This action plan is overseen by each Registered Manager and reviewed by the Head of Service and Business Development and Improvement Manager on a monthly basis with assurance on progress against the CQC action plan through the Community Resource Centre Improvement Group, Extra Care Excellence Group. It is also reported at the Provider Services Quality and Performance Meeting chaired by the Director of Adult Social Care.

3.4.2 A new digital visitor book in each CRC will be implemented in early December. This system will enhance General Data Protection Regulation (GDPR) compliance for all visitors and will provide us with an opportunity to collect feedback regarding the experiences and perspectives of individuals visiting our

care homes (families and professionals) which will inform our ongoing improvement journey.

- 3.4.3 Annual quality assurance questionnaires are undertaken in residential services. The data collected from these surveys provides valuable insight, enabling services to identify opportunities for continuous improvement. They show a 4.4 out of 5 satisfaction rating for Extra Care (74 responses from 135 residents) and Combe Lea care home (22 responses from 30 residents) from the surveys completed in July. The annual questionnaire for Cleeve Court care home will be undertaken in quarter 4 2025/26.

3.5 Extra Care Service Development – journey to excellence

- 3.5.1 Extra Care services are being strengthened through investment in staffing and targeted improvements. The focus on staffing and technological innovation is aimed at meeting the evolving and more complex needs of B&NES Extra Care residents.

- 3.5.2 Planned investments in additional care hours, digital compliance, and potential service expansion will enable the delivery of higher quality and more flexible person-centred care. These enhancements aim to reduce hospital admissions, boost tenant satisfaction, ensure compliance, and increase efficiency to provide better value.

3.6 Digital Care Planning

- 3.6.1 Since 2013, Extra Care has implemented a digital scheduling and monitoring system to organise care visits. This has provided carers with detailed, real-time information tailored to each resident's individual requirements and preferences which has supported consistency and reliable coverage of care delivery for residents. The systems help streamline administrative tasks, reduce paperwork, and offer immediate access to up-to-date care plans and schedules, enabling carers to focus on engaging with residents and managers to gain greater oversight of care delivery, which supports high quality care standards.

- 3.6.2 Over the last year the implementation of the Care Control System (CCS) platform has fully digitised care planning for all CRC residents, granting managers robust oversight of care activities and further reinforcing compliance, transparency, and continuous improvement at Cleeve Court and Combe Lea care homes. The system was implemented more quickly at Combe Lea, due to the stability of its management, but is now embedded in both services. Staff and managers have received training on the use of the digital platform alongside additional training opportunities on effective care planning practice.

3.7 Community Resource Activity Co-ordination

- 3.7.1 The service is currently refreshing the activity co-ordination programme that is delivered to residents within care homes. These programmes are designed around residents' needs and wishes and meet regulatory requirements. The activity-based programme of events brings a holistic approach to wellbeing, balancing physical, emotional, social, and cognitive stimulation. The services work closely with local schools and churches to either visit residents or support our

residents to visit them; for example, Cleeve Court residents visit the local church and enjoy a regular lunch there with other members of the community.

3.8 B&NES Commissioning Quality Assurance Visit

3.8.1 B&NES Commissioners were invited by the Director Adult Social Care to undertake a Quality Assurance Visit to each Community Resource Centre in July 2025. Combe Lea had a strong assurance visit scoring 85% for good level of compliance and standards. For Cleeve Court the assurance visit resulted in a robust service improvement plan to address criteria scored as requires improvement or non compliant.

3.8.2 Due to the change in Registered Manager at Cleeve Court it was agreed with the Quality Assurance Manager and Head of Service to hold the progress review visit in Autumn to allow the newly appointed Registered Manager adequate time to address key actions. As an interim measure the Head of Service met with the Quality Assurance Team in August to provide an update on progress.

3.8.3. B&NES Commissioners will be undertaking Quality Assurance Visits across Extra Care schemes, and the first service to be visited is The Orchard with a planned visit in December 2025.

3.9 Compliments and Complaints

3.9.1 Residential Services capture compliments received, and these are reported at the Provider Services Quality and Performance Meeting. Some recent examples include:

I couldn't ask for my Mum to be in a better place. A home that really feels like a home, amazing staff! Very grateful for Cleeve Court. (Family member feedback)

We were very apprehensive about KA going to respite care for the first time, but the moment we walked into Combe Lea we were welcomed by all the staff, and everyone seemed to know his name straight away, the feeling of caring by everyone was over whelming, the home itself is clean, tidy and welcoming, his room was lovely with en-suite facilities, TV and everything to provide a 'home from 'home'. We cannot thank everyone enough, not just for your kindness and caring to him but to the whole family, I have absolutely no hesitation in recommending Combe Lea wholeheartedly. (Family member feedback)

During his care review today, DK's son said, "I am very pleased with the support from the care team, and the fact that the manager CN came up and actioned things so quickly, we are very happy with all the plans that have now been put in place". (Tenant feedback Avondown House – Extra Care)

A client during a review stated "You guys make me feel safe, I know you are there if anything happens to me. There is time that I have been very bad (health) and it would be worse if staff didn't help, also a staff member J, brings light to the room". (Tenant feedback St Johns Court – Extra Care)

Residential Services work in accordance with the council's complaints procedure to log all complaints with the B&NES Complaints and Data Protection Team to ensure they are recorded, monitored and quality assured in line with the statutory

procedure and the complainant is told about their right to escalate to the Ombudsman.

In Quarters 1-3 2025/26 there have been 2 complaints in Extra Care and 1 complaint for Cleeve Court care home which followed the safeguarding process to address the complaint.

3.10 Safeguarding

3.10.1 Internal Auditors (One West) recently conducted an audit review of the Councils provider services duties in relation to safeguarding. The audit focussed on the '*safeguarding pathways from point of referral through to completion of enquiry and risk mitigation*'. Cleeve Court care home underwent the audit with the audit closing on 30th October. A final report of the audit findings, detailing adherence to procedure and any areas of improvement will be issued to the service in November. This will follow a feedback session with the Lead Auditor on 6th November 2025 between the Lead Auditor and Assistant Director Adult Regulated Services and Governance.

3.10.2 Safeguarding referrals are monitored by each Registered Manager and Head of Service and reported at the Provider Services Quality and Performance meeting. At the meeting held on 22nd September 2025 Extra Care reported 3 safeguarding referrals and CRCs reported 5 (1 Combe Lea and 4 Cleeve Court).

3.11 End of Life

3.11.1 Families are invited to participate in all stages of end-of-life care and may remain with their loved ones if they choose. The service has guest bedrooms available for families to use at this time. The Stepdown Service has enabled couples to stay together during this difficult period, as one partner approaches an expected death, the Extra Care Step Down Service provides wraparound support to ensure comfort, dignity, and continuity of care for both individuals.

3.11.2 Staff receive support for end-of-life care through regular supervision, peer support groups, employee assistance programmes, bereavement resources alongside wellbeing initiatives across services. Managers provide opportunities for staff to debrief following end of life to help maintain mental health and resilience. Staff training for end of life includes induction programmes, online modules, workshops, specialist courses delivered by Dorothy House, simulation exercises and regular refresher sessions. Staff feedback is used to update support and training methods to ensure that staff are compassionate, skilled and confident in providing end-of-life care to our residents.

3.12 Health, Safety & Wellbeing

3.12.1 Residential Services have had three assurance activities in recent months: the ASC Provider Services Fire Risk & Control Audit (May 2025), the Adult Social Care Site Safety Inspections (June–July 2025), and the Health, Safety & Wellbeing Regulatory Compliance Reviews (October 2025 - ongoing). The audits and inspections confirm a strong commitment to compliance and continuous improvement. Some areas for improvement were identified and clear recommendations have been taken forward to address these actions, including

regular fire warden training, improvements to housekeeping, standardised signage, GDPR-compliant visitor logs, and strengthened communication with property compliance. Overall services are well managed and compliant with targeted actions in place to further strengthen health, safety, and wellbeing for residents and staff.

4 STATUTORY CONSIDERATIONS

- 4.1 The current CQC ratings and date of last inspection for Community Resource Centres (Cleeve Court and Combe Lea) and Extra Care can be reviewed in Attachment 3. The five Extra Care schemes remain rated as 'good' and the two Community Resource Centres are rated overall as 'requires improvement' but with good in key areas such as 'caring' and 'responsive'.
- 4.2 CQC conducted an unannounced onsite inspection of Cleeve Court CRC in July 2025 with assessment activity running from 17 July 2025 to conclusion in early October 2025. The inspection concentrated on the domains of 'safe' and 'well led' as these were rated as requires improvement at the December 2022 inspection. As part of the CQC inspection methodology the service worked with the Lead Inspector to develop an action plan, and this was updated and reviewed with the Lead Inspector in early August, with subsequent progress updates being submitted by the service in August, September and October. The draft inspection report has been received by the Director Adult Social Care and this is in the process of being checked for factual accuracy by 14th November 2025 CQC deadline. Following this process the CQC report will then be finalised and published but we cannot anticipate CQC timescales for publication.
- 4.3 CQC notifications are monitored by each Registered Manager and Head of Service and reported at the Provider Services Quality and Performance meeting. At the meeting held on 22nd September 2025 Extra Care reported 1 CQC notification and CRCs reported 4 at Cleeve Court.

5 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

5.1 Financial Performance

- 5.1.1 Financial performance for the care homes and Extra Care is well managed and there is good financial monitoring and forecasting across Residential Services. Financial performance is reported at the directorate finance meeting as well as the Provider Services Quality and Performance meeting.

5.2 Staffing

- 5.2.1 Residential Services has a permanent staffing establishment of 240 staff which equates to 43% of the total ASC workforce at B&NES. In addition to this, there are a total of 213 bank staff, including both dedicated bank staff (60) and permanent staff who also hold a bank contract (153). The bank function provides staff with the opportunity to take on additional shifts which support care continuity and reduces reliance on agency staff. Over the past six months, the bank staff function has increased coverage requirements by 17%. Use of agency staff is monitored by the manager in the service. Each year agency usage has decreased and use of our own bank staff is encouraged for the benefit of the residents and reduction of reliance on agency staffing.

5.2.2 There are currently 23 vacancies across the residential services (made up of 8 night support workers, 10 support workers, 2 senior leaders, 2 cooks and 1 catering assistant). Staffing vacancies are monitored and actioned with HR recruitment colleagues as well as reported to the Provider Services Quality and Performance meetings. This is managed through use of bank and agency staffing and where agency staff are required the service seeks continuity of agency staff.

5.2.3 Staff retention has improved across Residential Services with 16 leavers recorded from April-September 2025 compared to 23 staff leavers for the same period in 2024.

5.2.4 Sickness absence monitoring by service managers is an important management function to ensure robust oversight of sickness absence and staff support across services. Sickness management utilises monitoring and supervision of staff along with stress risk assessments, wellbeing action plans and occupational health referrals where appropriate.

5.3 Mandatory Training and Professional Development

5.3.1 Staff are required to complete a suite of mandatory training requirements (Attachment 4) as part of their induction and ongoing professional training to enable safe, efficient, and effective services to be delivered to residents. Completion rates for mandatory training are reported to the Provider Services Quality and Performance meeting.

5.3.2 Each member of the Residential Services workforce is provided with access to Clinicalskills.net. This online platform provides over 300 illustrated step by step guidelines to support clinical skills and provides links to enable further information and national guidance to be accessed.

5.3.3 The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors, consisting of 15 standards that require both theoretical study and practical application within the workplace, for those who are 'new to care'. For any new staff who have not completed the certificate previously, it is required that all elements of the standards are completed and assessed as part induction and completed within 12 weeks of commencing employment.

5.3.4 All service managers (inclusive of Registered Managers, Deputy Managers and Service Managers) are offered the opportunity to complete the Level 5 Apprenticeship in Health and Social Care. Currently 58% of the management team have achieved their Level 5 with another staff member enrolled to commence the course.

5.4 Property Update

5.4.1 The repair of the crib wall at Cleeve Court is now complete and works on the crib wall at Combe Lea is scheduled to commence in January 2026. Paving and walking path maintenance around the gardens will be carried out over the winter months to ensure that we are offering residents and their families improved outdoor spaces for recreation and social interaction. In collaboration with property colleagues, we are currently evaluating the most sustainable and energy-efficient refurbishment solutions for the conservatories and balconies at each care home.

These enhancements will address existing maintenance needs and provide additional areas for activities for residents.

- 5.4.2 Capital funding is being utilised to enhance resident quality of life by refurbishing bedrooms and doors in a manner that is dementia friendly. This programme of work includes features such as clear signage, contrasting colours, and easily navigable layouts, all of which help residents living with dementia feel more secure and independent within their environment. In addition, we are developing and implementing digital tools that are accessible and dementia friendly, supporting residents to maintain meaningful social connections and promoting overall wellbeing.

6 RISK MANAGEMENT

- 6.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.
- 6.2 The Residential Services Risk Register is held by the Head of Service and reviewed with the Assistant Director Adult Regulated Services on a monthly basis. The ASC Risk Register has an entry for Provider & Residential Services Quality Performance and CQC Inspection and this risk is mitigated through CQC action plan monitoring at Provider Services Quality and Performance Meeting and reviewed bi monthly.
- 6.3 Business Continuity Plans are held at each service and the Head of Service escalates key issues in relation to risk and business continuity via the directorate level ASC Risk Register and Provider Services Quality and Performance Meeting. The service works in close collaboration with the Council's emergency planning team to enact continuity plans where required i.e. adverse weather conditions and to ensure protocols in place for duty director access.

7 EQUALITIES

- 7.1 ASC workforce equalities data demonstrates that B&NES residential services staff are predominantly female (84%), white (75%), heterosexual (68%) and non disabled (78%). There are a high proportion of staff who are 50 years of age plus at 47%. Skills for Care demographics trends show that B&NES follows national trends for age, ethnicity and gender workforce composition.
- 7.2 Combe Lea has worked closely with BEMSCA (Bath Ethnic Minority Senior Citizens Association) to support a resident who was placed in Combe Lea on emergency respite. The resident has a Caribbean background and the Hospitality Manager worked with BEMSCA to understand particular dietary needs and wishes and regularly sourced appropriate foodstuffs and ingredients to enable to the resident to cook his preferred food himself or with support from staff.

8 CLIMATE CHANGE

- 8.1 Both care homes are equipped with heat pumps and solar panels, ensuring that their energy needs are met sustainably. Recently, the caretaker's van was upgraded to an electric vehicle enabling site visits to be carried out with zero emissions and each site is committed to recycling waste wherever possible.

Extra Care services collaborate closely with tenants, providing support and encouragement for recycling initiatives.

9 OTHER OPTIONS CONSIDERED

9.1 As part of our annual quality assurance process the Adult Regulated Services Self Assessment is scheduled for an update in January 2026.

10 CONSULTATION

10.1 Extra Care is delivered in partnership with three social housing landlords (Curo, Guinness & Livewest) to ensure we are delivering the best support we can to enable those tenants to live as independently as possible.

10.2 Both CRCs work closely with health system colleagues (GPs/District Nurses) and residents receive regular support from local opticians and podiatrists. ASC have recently opened an Occupational Therapy Assessment Clinic within our Midsomer Norton CRC (Combe Lea).

10.3 Residential Services have established a partnership with Bath College to offer work experience placements for health and social care students, thereby contributing to the development of the future workforce within the adult social care sector.

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Background papers	Not Applicable
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