

Lead Member (Adult Services and Public Health) report for Scrutiny – April 2026

A. Adult Social Care Update

1. Dementia strategy

Background and October 2025 Position (Recap)

As reported to the Scrutiny Panel in October 2025, work has commenced on developing a new Dementia Strategy for B&NES, structured around the five domains of the NHS Dementia Well Pathway: *preventing well, diagnosing well, supporting well, living well, and dying well*. A draft strategy scope, project plan and Steering Group Terms of Reference has been completed, with the aim of producing the full strategy within 12 months. A multi-agency Steering Group is established, including representatives from B&NES Council, ICB, AWP, Alzheimer's Society, ReMind, CMHT, carers, care-home and home-care providers, and local VCSE organisations. The approach is rooted in co-production, with focus groups and surveys planned to ensure lived-experience shapes priorities.

Progress Since October 2025

- **Steering Group** - The Dementia Strategy Steering Group met for the first time on 27 November 2025 and for a second time on 26 February 2026. There are now with 24 members of the group from a broad range of health, care, community and voluntary sector organisations. The NHS Dementia 100 Self-Assessment Toolkit is being used to benchmark current pathways and processes and to identify areas of good practice, variation and gaps requiring improvement. This work will help inform priorities to be addressed through the strategy.
- **Engagement Activity**

Early engagement activity has been taking place, this includes:

- Informal visits to groups to gather insight into the lived experience of people with dementia and carers.
- Frontline staff engagement through surveys and attendance at team meetings
- Engagement conversations with RUH, Ambulance Service, Police and VCSE organisations
- Identification of people with dementia and carers willing to participate in formal focus groups.
- Formal Engagement (March onwards)
- A series of 5 focus groups with people living with dementia, carers, and practitioners has been planned between April and September, to co-design the strategy vision, structure and priorities under each domain
- A wider public survey was launched in March.

- The B&NES ASC Communications Lead is supporting development of communications materials to promote the survey and maximise participation.
- A special meeting for the Older People's Voice Forum is planned for late April to test emerging priorities

Next Steps

- Completion of mapping, gap analysis and identifying priorities from the Dementia 100 tool by the end of April
- Analysis of feedback from staff surveys and informal visits by end of May to inform priorities.
- Delivery of formal engagement (focus groups and public survey) from March onwards.
- Analysis of dementia data and alignment with other local strategies and priorities by end of April

2. Sensory Impairment Support Service

The new service was successfully mobilised on 1 January 2026 under a new partnership between Sight Support West and the Royal Association of the Deaf. Providers and commissioners continue to raise awareness of the service with residents, partner organisations, and local services through practitioner communications, social media, the Live Well B&NES resource, the One Stop Shop and the Community Wellbeing Hub. This activity led to an increase in referrals in March, supporting residents to access the information and support they need.

3. Advocacy Services

The new contract for advocacy services in B&NES went live on April 1st, with The Advocacy People (TAP) as the newly commissioned provider, replacing POHWER. Transition arrangements were carefully managed and progressed smoothly, with no disruption to people receiving advocacy support. The new, streamlined service brings all statutory and agreed discretionary advocacy into one independent, rights-based contract. It will support residents to understand their rights, express their views, participate in decisions, and have their statutory rights met.

4. Re-commissioning of LD, care home and home care contracts

Commissioning activity across these three work programmes is currently focusing on pre-procurement activity, including baselining of current arrangements, developing needs and gaps analysis, and engagement with a range of stakeholders, such as residents, practitioners, and ICB commissioners. Information and insights generated by this activity will directly inform commissioning intentions and formal market engagement planned in spring. Commissioners and procurement colleagues are also developing procurement timelines for each programme, which will be included in the next update.

5. Learning Disability Provider Service

Work continues to review the services delivered by the in-house learning disabilities teams in B&NES. This includes working closely with SEND and Children's Social Care, introducing structured transition frameworks to ensure smoother journeys for young people as they progress into adult services. The changes reflect our commitment to promoting independence, inclusion, and choice for everyone accessing Adult Social Care.

Plans include increasing the diversity of day opportunities available to provide more meaningful community engagement and skill-building for service users. We are proposing that, our two day services (Carrswood and Connections) will in future be complemented by a hub-and-spoke model that will create increased community-based options for our service users. We are growing partnerships across the council, including Victoria Park, Keynsham Re-use Shop, Radstock Town Council, and Heritage Services to increase the work placements available. We are also expanding our offer and services will be available for individuals aged 16 and above, not just 18+, introducing a non-educational SEND option. This will offer alternatives to college or residential placements, targeting young people whose needs are not currently met locally.

In addition, we are developing a short-term (6–12 weeks) enablement service (as outlined in the MTFs) to support individuals living in residential services to build skills and progress towards independence and we are continuing to expand our Shared Lives offer to enable more people to live independently with support.

We will be holding a series of engagement events with service users and families throughout May and June to seek feedback on our plans, a separate consultation will take place with staff.

6. Update on Combe Lea CQC Inspection

The Care Quality Commission (CQC) undertook an unannounced inspection of Combe Lea on 11th December 2025 and the assessment closed on 9th January 2026. The CQC report was published on 30th January 2026 with a rating of Good and a score of 75%. The domains inspected included Safe, Effective and Well Led as these were rated as Requires Improvement in the previous inspection conducted in October 2022.

The CQC report for Combe Lea is summarised below:

Service overview and improvements: Since the last inspection, the service has addressed breaches in fire safety, medicines management, consent, and governance. Systems for safeguarding and fire safety are now effective, and medicines management has improved with safe administration protocols in place. Mental Capacity Assessments comply with legislation, though documentation consistency is still being improved. Staff are adequately trained and sufficient in number to meet residents' needs.

Positive experiences from relatives: Relatives expressed satisfaction with the care, noting safety, good staffing levels, and excellent communication. They are involved in care planning and kept informed about health changes. Comments highlighted the home's caring environment, quality of food, and engaging activities such as bingo and quizzes.

Safety improvements and culture: The service is rated good for safety, reflecting protection from abuse and avoidable harm. A positive safety culture emphasizes openness and learning from incidents, with measures like "do not disturb" aprons during medicine administration to reduce errors.

Safe systems and transitions: Care systems ensure continuity and safety, with comprehensive sharing of key information such as hospital passports and pre-admission assessments. Referrals to healthcare professionals are timely to meet changing needs.

Safeguarding and consent: Safeguarding incidents are managed and recorded effectively, with trained staff aware of procedures. Deprivation of Liberty Safeguards (DoLS) are appropriately applied and monitored. Consent processes comply with the Mental Capacity Act, with ongoing improvements to documentation consistency.

Risk management and environment safety: Risks to residents are assessed and managed holistically, involving residents and relatives. The environment is generally safe and well maintained, with regular safety checks including fire safety and infection control. Some minor issues like unsecured wardrobes were promptly addressed during inspection.

Staffing and infection control: Staffing levels are sufficient with qualified and trained staff, supported by regular supervision and competency checks. Infection prevention is well managed with clean facilities, staff training, audits, and use of personal protective equipment.

Effective care delivery and health support: Care plans are comprehensive and evidence-based, with regular assessments and referrals to health professionals such as mental health teams and district nurses. Daily activities promote physical and mental wellbeing, and meals are nutritious and varied. Collaboration among care staff and health services ensures coordinated care.

Leadership and governance: The service is well-led with stable, experienced management fostering a culture of openness, inclusivity, and continuous improvement. Staff feel supported and encouraged to develop. Governance includes clear accountability, regular audits, and compliance with reporting requirements. Partnerships with local organisations enhance community involvement. Learning from incidents and innovation are promoted, including participation in pilot schemes for dementia diagnosis support.

The published report for Combe Lea features some fantastic praise from residents' relatives and health professionals:

“It’s absolutely wonderful. It’s a lovely home - so caring, the quality of the food and care is head and shoulders above anything else we have been to.”

“I cannot say a bad word about Combe Lea, it is welcoming and the support workers and staff are great. My relative is well looked after, the bed is made and clean, they provide entertainment and give 100% in giving them good quality of life.”

“I feel the care in Combe Lea to be exceptional, and this would be the only residential home in the area that I would be happy for members of my family to live in.”

Combe Lea hosted a celebration event on 12th February for residents, family members and staff to recognise the achievement in moving to a CQC rating of Good.

B. Public Health Update

7. Drug and Alcohol Conference - In February, Bath & North East Somerset Council hosted its first local Drug and Alcohol Conference, bringing together nearly 100 professionals from over 20 organisations across health, social care, enforcement, academia and the voluntary sector. The event combined lived-experience testimonies, expert presentations on emerging drug trends and enforcement challenges, and practical workshops on harm reduction, treatment access and support for people with complex needs. The conference was well-received, strengthened partnership working across the system, and has helped shape local priorities for preventing drug- and alcohol-related harm in B&NES.

8. Good Food Local Benchmarking Survey and Food Strategy

B&NES Council has completed a submission to the Sustain Good Food Local Benchmarking Survey which all local authorities in the South West agreed to complete during January 2026. The results of the survey are now published on the Sustain website <https://www.sustainweb.org/good-food-local/> .

Our response to the survey was informed by evidence gathered from colleagues across the Council, and signed off for publication by Amy McCullough, Consultant in Public Health, Jackie Clayton, Head of Place Shaping and Cllr Sarah Warren.

In a regional press release and blog following publication, B&NES Council Food Waste recycling was highlighted as an example of good practice. Press Release <https://www.sustainweb.org/news/mar26-good-food-local-south-west/> Blog <https://www.sustainweb.org/blogs/mar26-south-west-celebrates-good-food/>

The SW Office for Health Improvement and Disparities (OHID) will be co-ordinating a regional Good Food network which will bring together representatives from local

authorities to share priorities, good practice, support and guidance to progress this agenda both regionally and locally.

In addition, the Council has developed a Food Strategy for B&NES that will be published this Summer. The Strategy has been developed in collaboration with partners and community groups and with engagement with communities. The Strategy celebrates the people, projects and local food assets we already have, and sets a clear shared vision for the next five years. It also sets out the key needs and gaps that must be addressed to make the local food system healthier, fairer and greener, whilst supporting the conditions for local food growers and businesses to thrive.

9. The Active Way

The active way social prescribing initiative, based in the Somer Valley has featured in a recent UWE blog published to mark National Social Prescribing Day. The link to the blog is: [blog link](#)

10. Changes to Public Health Leadership

We were sorry to say goodbye to Becky Reynolds when she retired at the end of March. She has been an excellent DPH and will be missed. Paul Scott has been appointed to the interim DPH role and backfill is being arranged to cover his previous position in public health while a permanent appointment is made. We are very grateful to Paul for his willingness to take on the interim DPH role.

Alison Born – Cabinet Lead Adult Services and Public Health