

Agenda for Scrutiny Committee

Thursday, 20 July 2017, 6.00pm



[Members of the Scrutiny Committee](#)

Venue: Council Chamber, Knowle, Sidmouth, EX10 8HL

[View directions](#)

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- 1 [Public speaking](#)
- 2 To confirm the minutes of the meeting held on 20 June 2017 (pages 3 - 10)
- 3 Apologies:
- 4 [Declarations of interest](#)
- 5 [Matters of urgency](#) – none identified
- 6 To agree any items to be dealt with after the public (including press) have been excluded. There are no items that officers recommend should be dealt with in this way.
- 7 Decisions made by Cabinet called in by Members for scrutiny in accordance with the Overview Procedure Rules. There are no items identified.

Matters for Debate

- 8 **Citizens Advice East Devon (pages 11 - 19)**
Hilary Nelson, CEO, Strategy and Development of CAED will present an outline of the work undertaken by the service, which is part funded by the Council.
- 9 **Modern day slavery awareness update (page 20)**
A brief report by the Democratic Services Officer for the committee to note on the implementation in the Council's services in slavery awareness.
- 10 **Scrutiny forward plan (pages 21 - 22)**

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[Decision making and equalities](#)

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EAST DEVON DISTRICT COUNCIL

Minutes of a meeting of the Scrutiny Committee held at Knowle, Sidmouth on 22 June 2017

Attendance list at end of document

The meeting started at 6.02pm and ended at 8.49pm. Cllr Maddy Chapman acted as Vice Chairman for the meeting, in the absence of Cllr Alan Dent.

***1 Public speaking**

Mr Paul Arnott requested that the committee consider their capacity to consider the role of the Returning Officer in the process of all elections. He listed a number of issues in the election process and made reference to the issue of postal votes at the most recent Parliamentary election without an official mark. He made reference to media reports and a report by the Electoral Commission which he felt warranted the committee to examine the process. The Chairman agreed to consider this request under item 10 of the Scrutiny Forward Plan.

Other public speakers present requested to speak before item 8 on the agenda relating to the NEW Devon CCG decision on inpatient beds.

***2 Minutes**

The minutes of the Scrutiny Committee held on the 9 May 2017 were confirmed and signed as a true record.

***3 Declarations of interest**

Councillor Cherry Nicholas declared a personal interest for minute 5: her son works for the NEW Devon CCG.

***4 Matters of urgency**

The Acting Vice Chairman commented on the valuable training presentation that had been provided the previous evening, on modern day slavery. She raised a concern that no council officers were present at that meeting, and would discuss further under item 10 Scrutiny Forward Plan what further work needed to be undertaken.

***5 NEW Devon CCG decision on inpatient beds consolidation**

The Chairman welcomed Dr Simon Kerr, who currently chairs the Eastern Locality of the NEW Devon CCG; and John Finn, Deputy Chief Operating Officer for Planned Care and Programmes, who was attending on behalf of Rob Sainsbury.

Mr Finn briefly outlined the CCG view, following their attendance at the Health and Adult Care Scrutiny Committee of Devon County Council (HACSC), that the CCG had presented the necessary evidence in the consultation documents; and that agreement had been made at that meeting on 19 June 2017 that the CCG would work with the HACSC with a further meeting scheduled for the end of July. He reiterated the financial challenges facing the NHS and acknowledged that they had to make unpopular choices, but it was no longer possible to ring fence elements of the service; however no bed closures would be made until the new method of care was in place.

Dr Kerr briefly outlined the work currently being undertaken through reference meetings that were drawing up the implementation process, and the work of the implementation

assurance panel in assessing the impact the changes would have, along with a check on the gateway questions as set out in the business case.

Martin Shaw, Devon County Councillor for Seaton, spoke about the evidence provided for the decision made. He felt that this was inadequate, in particular in relation to the ageing population, and he circulated some data for the committee to illustrate this. There was also no clear link to estates management. Evidence from constituents indicated that implementation was already underway as hospital beds were being run down. The late change from closures at Sidmouth to Seaton also needed to be questioned, as this impacted on a wide area of the District, including Axminster who had been given assurance that their hospital bed closures would be managed by the retained beds at Seaton.

Gillian Prichett, a resident of Honiton, expressed her view that the care at home method does not work. She outlined the detail of her mother's case, and explained the impact of the use of carers and the shortage of such carers. She felt there needed to be a more robust model. She also stated that she felt implementation had already begun and was dissatisfied with how the HACSC had dealt with the issue on the 19 June.

Stephen Craddock a member of the Hospital Services Honiton Steering group, stated he felt disillusioned with the political process after witnessing the HACSC meeting on 19 June. He also commented that he felt there was inadequate evidence for the decision, and felt the impact for future years was severe. He commented on the lost battle to retain Honiton hospital beds, but asked if the CCG could consider the provision of other services in the space at Honiton that the removal of those beds had created, therefore relieving some of the pressure on RD & E.

Paul Arnott, speaking as a resident of Colyton, questioned whether the financial savings that the CGG had quoted could be made with the move to a new model of care. He recounted his own experiences in medical care and told the committee that avoiding muscle wastage required occupational and physical therapy, not care at home. He stated that local doctors vehemently opposed the decision.

The Chairman requested to hear from local ward members before opening debate for the committee. They raised the following points:

- Consultation should be undertaken at a formative stage, and as wide ranging as possible;
- Advice and guidance from a number of professional sources, including local GPs, was being ignored by the CCG;
- Evidence suggested that referrals were deliberately cut to show low occupancy of targeted hospitals for bed closure;
- No clear evidence of clinical results of the proposed new model of care;
- The proposed changes were disrespectful to the elderly; money spent on nursing agencies would be better invested into convalescent homes;
- The CCG should look to the local community to help develop solutions for future care;
- Patients actively sought community hospitals in preference to being at Exeter, particularly because of transport issues;
- The proposals presented a short term strategy and would fail in the medium to long term.

The Chairman of the Council spoke with regard to the decision to close beds at Seaton, with an Axminster perspective. He, among others, had considered carefully the

data presented and believed the decision is still not supported by a balanced examination of the inequality decision criteria, contained in JSNA profiles, that the CCG confirmed had been used.

The main weakness in the data was that some areas of population were not included in the comparison despite being close by and which were placed in Seaton Town in the Devon JSNA Community Profile 2016. Axminster was also not included. This is surprising given that on more than one occasion the CCG and NDHT declared during the consultation on the closure of the Axminster Hospital beds that Axminster had not lost these beds; they had instead been relocated to Seaton.

The Axe Valley Hub Steering Committee, of which the Chairman of the Council is a member, has been asked to lend its weight to a Judicial Review against the decision to close Seaton beds. However, in spite of the concerns about the veracity of the data used to form the decision, the Steering Committee have decided not to do so, as they believe that scarce NHS resources should not have to be used to defend this decision. Instead, the Steering Committee want to see all available resources being committed to the Axe Valley to support the introduction of the New Model of Care.

During a workshop attended by members of the Steering Group at Seaton Hospital, a number of areas of concern were identified – not least end of life care in the Axe Valley. This is particular relevant given the ageing population of this part of Devon. An ageing population affects the whole of the County but the 2016 ONS figures for the 29 Devon Market and Coastal Towns describe Seaton as having the biggest proportion of people aged 65 and over at 40% and Axminster equal third with 31%, contrasting with a Devon town average of only 25%. In addition to the concentration of ageing people in the Axe Valley it has been acknowledged that Axminster, given its geographical location, requires additional attention as part of implementation planning for the changes.

The Steering Group believe that the Hub (more recently referred to a Health and Wellbeing Centre) is vital to the delivery of the new model of care for the community and planning has been under way for the past 18 months to make this a reality. Despite NDHT declaration of support for the Hub initiative, there has been no real progress to date. However, with the contract having passed to RD&E they are now more confident in the successful development of the Hub which could provide a dedicated comprehensive assessment facility, based in Axminster, to inform the single point of access and rapid response concept. The retention of inpatient beds in Seaton is central to this concept. The Group had a meeting recently with Angela Pedder and Neil Parish, who in particular has shown great interest in and is lending his support to the establishment of the Hub.

The committee then questioned the CCG representatives, including:

- How many additional staff would be required to deliver the new model of care? In response, Mr Finn explained that the RD&E, as provider, will present to the CCG what level of staff would be required but this figure was not known at present and he could not give the Chairman any indication of the scale of staff, other than that it would be more than the current level;
- In response to a supplementary question on this, in how costs could be accurately calculated for the new model of care if staffing levels were not known, Mr Finn responded that the model in use at North Devon provided evidence of the cost;

- Staffing was already an issue for health services with national shortages. The Chairman asked the CCG if it was confident that the necessary number of staff for the care at home package could be recruited, particularly in view of Brexit. He quoted a report that showed that the number of European Union nurses coming to work in the UK had fallen by 96% post Brexit (1,304 in July 2016; 46 in April 2017); Dr Kerr commented that the work of their reference group and implementation assurance panel would check to ensure that enough staff were in place before implementation;
- Evidence of four cases of discharge of patients with no package of care in place was presented to the CCG representatives; Mr Finn advised he would need details of those individuals to look into why that had occurred;
- Examples of the benefits of implementing the new model were requested; in response Dr Kerr outlined the community connect telephone service that was already in operation whereby a GP or community nurse could expect a response in two hours. He explained that additional community nurses and therapists were already in place;
- In response to concerns raised about time permitted to carers per patient, from personal experience, Dr Kerr reiterated that the current system needed to change as it would only get worse and increase the risk to patients; the new model would free up resource to provide the new model of care;
- The Chairman questioned the figure quoted of 64% of community beds where patients could be looked after at home, when another published figure was 47%. In response, Dr Kerr explained that the 47% was a figure calculated by the Northern Devon Healthcare Trust; the RD&E on as the current provider had calculated 64% on their audit;
- The Chairman and others asked questions relating to the use of carers, including the percentage of patients who would be able to be cared for in the community. Members felt that the care at home model and the use of carers were inextricably linked, and that models used elsewhere would not reflect the rural issues faced by carers of travel times and costs. Despite these questions being pursued, the CCG representatives would not respond on those questions as they deemed these related to the provision of social care provided by Devon County Council (DCC) and therefore should be responded to by them, not the CCG. They did confirm that they work closely with their partners at DCC and were confident that the county had stringent checks in place for carer services provided, including those from private contractors;
- Evidence of implementation already underway had been provided by a number of constituents to their ward members, and therefore considerable indignation at the response that the representatives were not aware of deliberate actions to prevent bed usage at the hospitals set for bed closures;
- In response to a question about what happens to those hospitals once the beds are removed, Mr Finn responded that there was no list of hospital closures – if a property became surplus, it had to be signed off by the CCG as being so. In pushing this point, the Chairman sought to establish, at the point that the CCG made this determination who they informed. Mr Finn could not respond but did state that he would check and report back.

At the end of the debate, Dr Kerr reiterated that current care levels would only get worse if no action was taken, and that no beds would be closed until implementation was confirmed as safe and in place to deploy.

RESOLVED that:

1. The Committee reiterates its strongly held view that the existing level of community hospital beds in East Devon should be retained, and that there should be no further closure of community hospitals in East Devon;
2. The Committee expresses its great concern at the proposed drastically reduced level of hospital beds in East Devon, particularly in view of general population growth projections, and projected increases in the population of elderly people - already some of the highest levels in the country;
3. The Committee is greatly concerned that the NEW Devon CCG decision, if implemented, would result in no community hospital beds east of Sidmouth, which would leave residents in a huge swathe of rural East Devon remote from the nearest hospital facility and with poor public transport connections to the nearest hospital;
4. The Committee is greatly concerned that evidence of satisfactory replacement care services, and detailed financial costings, has not been provided by NEW Devon CCG, despite being requested to provide such information by the Devon County Council Health and Wellbeing Scrutiny Committee on 7 March 2017, and by East Devon District Council Scrutiny Committee on 24 November 2016;
5. the Committee is greatly concerned that NEW Devon CCG appears determined to press ahead with closure of beds and hospitals in east Devon, despite lack of evidence to justify closure and establishment of care at home services;
6. the Committee is still of the view that the comparison to Northern and Western Devon areas is unfair as the demographics are not the same in Eastern Devon;
7. the Committee agrees to write to the Devon County Council Health and Adult Care Scrutiny Committee, urging it to refer the NEW Devon CCG decision to the Secretary of State for Health, because of a lack of assurances or evidence of the practicality of the proposals;
8. the Committee agrees to write to the Devon County Council Health and Adult Care Scrutiny Committee, urging it to refer the NEW Devon CCG decision to the Secretary of State for Health, as a matter of urgency, as it is concerned that lack of early submission will result in NEW Devon CCG going ahead with its unpopular, unjustified and damaging proposals;
9. the Committee includes in that letter a reiteration of seeking from the CCG that other health services such as the Minor Injuries Unit and maternity unit in Honiton remain 'ring-fence' protected for a period of time to be determined, before review in 3 years.

The Chairman thanked Mr Finn and Dr Kerr for attending and answering questions; he also thanked the Committee for their robust debate.

***6 Quarterly monitoring of performance fourth quarter 2016/17**

The Committee considered the published report. Some council actions and performance indicators were highlighted by the Democratic Services Officer to the committee, including:

- To note the success of the first phase of the roll out of the new recycling and waste collection contract, with Exmouth recycling rate improving from 44% up to 60%; the committee would receive an update in September on the implementation of the full roll out;
- Beach Safety officer post showing as vacant would be filled from 3 July;
- Percentage of council tax collected has improved and exceeds target for the final quarter, following a slip below in target the previous quarter; the percentage of non-domestic rates collected has also improved to exceed target.
- Planning appeal decisions allowed against the authority's decision to refuse shows concern for last quarter. Work is already underway to assess what can be learnt from those and a report will go forward to the Strategic Planning Committee on this issue on 11 July, confirmed by the Chairman of Development Management who was present at the meeting. He outlined his views on why these anomalies had occurred, and assured the committee that appeal outcomes were reported back to the Development Management Committee to keep them up to date;
- Random vehicle checks have previously been flagged up as a perennial problem over the years and previously discussed at Scrutiny on a few occasions – this approach has now been revised to target specific vehicles of concern and the service is now fully staffed, leading to a dramatic improvement in performance;
- Percentage of other planning applications determined within 8 weeks – showing improvement and some notes there on improvements to the service being trialled – The Service Lead for Planning Strategy and Development Management is due to come to the committee with the improvements report;
- Red indicator for days taken to process housing/council tax benefit new claims and change events – month of March has seen high volume of calls to service, following sending out of bills and housing benefit letters, which then impacts on the team capacity to process claims. Steps are taken every year to prepare for this busy time and the Council continues to be one of the top performers in dealing with claims in the country, but this has been flagged up for Cabinet to monitor and the staffing level at predicted busy times is under review;
- To note that the Thelma Hulbert Gallery has exceeded its target of 10,000 people to see the exhibitions – they have reached 11,684.

In addition, the Committee discussed concerns in light of the recent Grenfell fire; the Portfolio Holder for Sustainable Homes and Communities outlined work undertaken by the environmental health teams on council housing and the robust checks undertaken in tendering for work to such properties. Housing Review Board had received a report on this issue at their meeting on the 15 June 2017 and a review of such materials in social housing was in immediate effect.

7 Scrutiny Forward Plan

In response to the request by Mr Paul Arnott, the Solicitor present advised the committee that current legal assessment is that the remit of the Scrutiny Committee does not extend to Parliamentary elections, which is the remit of the Electoral Commission. With District and Town/Parish elections being funded locally, there is scope for the committee to look at how local elections are run, but this needs to be a decision by the committee to decide:

1. if they want to scope that topic as being in the public interest to do so, and
2. what reasons there are for reviewing how they are conducted.

The Chief Executive has already indicated that there are two priority areas he is addressing following the Parliamentary Elections – firstly to ensure that the elections team get back to a

full staffing level; and secondly to review the delineation of the polling places and provide clear guidance on where campaigning can and cannot take place on the day of poll. He will report to Cabinet on this in due course, so there is an opportunity for the Scrutiny Committee to look at any decision made by Cabinet on that review.

In discussions the Committee made reference to some examples of the process that they had experienced and felt that it was right to put the subject to scope for the local elections, particularly because there had been complaints about the postal vote issue on two elections. The Democratic Services Officer asked for committee members to provide her with evidence to support the examples given, which would be considered in the scoping process.

Members also felt that a follow up report on modern day slavery, in terms of how officers of the council may discover such slavery, and how they should report it, should go to their next meeting in July.

Broadband and mobile phone coverage would be added and remain as a standing item, scheduled in as and when progress had occurred to report.

The Chairman reminded members that the next meeting in July would cover the East Devon Citizens Advice work.

Other topics suggested at the previous meeting were still to be scoped and a report will be made back to the committee on what topics could proceed.

RECOMMENDED to Cabinet that the Chief Executive's pending report to Cabinet on his two priority areas after the Parliamentary Election includes explanation of the postal vote issue of 25 May 2017 that did not have an official security mark visible on the front of the ballot paper.

RESOLVED to scope a review of the election process for local elections; add a follow up report on Modern Day Slavery to the July meeting; and retain Broadband and mobile phone coverage as a standing item on the Scrutiny Forward Plan.

Attendance list (present for all or part of the meeting):

Scrutiny Members present:

Roger Giles
Dean Barrow
Maddy Chapman
Bruce de Saram
Simon Grundy
Cherry Nicholas
Val Ranger
Marianne Rixson
Eleanor Rylance

Other Members

Megan Armstrong
David Barratt
John Dyson
Peter Faithfull

Geoff Jung
Brian Bailey
Mike Howe
Iain Chubb
Andrew Moulding
Paul Carter
Mark Evans-Martin
Dawn Manley
Helen Parr
Mike Allen
Ben Ingham
Susie Bond

Officers present:

Giles Salter, Solicitor
Debbie Meakin, Democratic Services Officer

Apologies:

Alan Dent
Bill Nash
Cathy Gardner
John O'Leary
Tom Wright
Stuart Hughes
Phil Twiss

Chairman Date.....

Report to the Scrutiny Committee of East Devon District Council

Citizens Advice East Devon

Our Work

Citizens Advice East Devon is a local charity; we receive no central government funding and our service is dependent on grants and donations. As a local charity we can be flexible, but have the advantage of national support, excellent information sources and a well-recognised brand.

Our aim is to provide free, confidential and impartial help to anyone who needs our service, whatever their problems may be and to use advice, support and education to help them overcome these problems. One of our greatest strengths as a service is that all our advisors are trained as generalists, meaning that, unlike more specialist services, we have the breadth of knowledge and flexibility to deal with most problems clients bring to us, including complex issues which may touch on many different areas of advice. At a time when funding for other support services continues to be cut and other sources of support are threatened, CAED continues to provide a wide-ranging support service for clients who often have nowhere else to turn for help.

In addition to its general advice services, CAED provides intensive specialist support in, amongst other things, benefits claims, benefits tribunal work, debt relief order work and family and relationship advice provided by a specialist family law solicitor from the Family Law Co, who provides a monthly surgery at Cranbrook. Our benefit tribunal appeals team provides support to numerous clients and has a more than 85% success record and their work is an impressive example of the Citizens Advice Service at its best.

We aim to make our services as accessible as possible to the people in East Devon who need our help. While the rurality of the district is challenging for any service provider, we currently provide face to face advice from seven locations across the district: our main delivery locations in Exmouth and Honiton, as well as outreaches in Seaton, Sidmouth, Axminster, Ottery St Mary and Cranbrook. We are also extending our telephone services, provided through Devon Adviceline, to ensure that those who struggle to access services in another way can still find the help they need.

We work with partner organisations to produce locally relevant self-help materials, such as the homelessness road-map for East Devon and a series of "life events" booklets, providing people experiencing life changes with relevant information and sources of local support. Where possible, we seek to educate people and improve their life skills and resilience, so that people are more able to help themselves and

their problems can be tackled early before they become more serious. For example we provide individual support to build financial capability and have secured Lottery funding to pilot a project to tackle digital exclusion and improve the IT skills of the most disadvantaged clients.

Our client facing service is provided almost exclusively by a highly dedicated force of volunteers, all of whom are trained and accredited to the very highest standards through the national Citizens Advice Service. The quality of our advice is audited every quarter through the national charity and currently has the highest possible rating.

Our Clients

In 2016 – 2017, Citizens Advice East Devon had 13,307 contacts with clients in seven locations. In total, 4,223 people in East Devon received a service from Citizens Advice and they presented with 11,123 issues or problems. This equates to one problem for every 12.42 people in East Devon¹.

We continue to provide intensive support to the most vulnerable people in our communities. In 2016/7, almost half of our clients (44%) were disabled or had a long term health condition, an increase of 5% on the previous year and more than twice the national average of 21%. In the last quarter of 2016/17, slightly more than half of our clients (50.4%) were disabled or had a long term health issue.

In the cases where client income was recorded, 56% of CAED clients in the last quarter of 2016/17 were on incomes of less than £1,000 per month. 34% had an income of less than £600 per month and 17% had an income of under £400 per month. 154 of our clients were homeless or threatened with becoming homeless. Nationally, Citizens Advice clients are 5 times more likely to be on low incomes than the population in general.²

The last year has seen a significant increase in the amount of casework (or complex intervention) undertaken on our clients' behalf, from 5% of total in the last quarter of 2015/16 to 9% in the last quarter of 2016/17. This intensive support for difficult problems, delivered to the most vulnerable clients, often takes place over numerous sessions, but means that we are targeting specialist resources at those who need it most.

¹ Based on the mid 2015 population estimate for East Devon of 138,141; EDDC "Knowing East Devon – A People and Place Profile" – Release 3 -2017

² Citizens Advice "Helping People Find a Way forward 2015/6"

The accompanying information sheet provides a breakdown of the most common issues among our clients last year along with a map showing where in East Devon our clients come from.

What our clients say

In our last client satisfaction survey³ 100% of those surveyed said they would use CAED's services again and 100% would recommend us to a friend, while 97% said that they had a positive or very positive view of our service overall.

One example of client feedback from June 2017 is this: *"You have been outstandingly patient in sorting out my problem...Your centre is like a comfort blanket. One gives a huge sigh as one's problem disappears in your capable hands."*

Our Impact

Figures from our national charity indicate that 2 out of 3 clients nationally had their problems solved by Citizens Advice and 78% of clients surveyed said they would not have been able to solve their problem without Citizens Advice intervention.⁴

In 2016/7 clients of CAED reported back to us income gains of £745,610, of which £557,000 was attributable to claims for statutory benefits or tax credits. We know from national statistics that the estimated impact of our work is much greater than the gains that clients come back and tell us about⁵. For example, from comparing the number of benefits clients we saw in 2015/6 with national statistics and according to a formula approved by the Treasury, we can estimate the amount of benefits gains to individuals in East Devon due to our intervention of around £4 million. These individual income gains, most of which we anticipate will be spent locally, are not only beneficial for clients themselves but the wider economy of East Devon.

Indirect financial benefits of our advice come from improved outcomes in clients' lives, including better employment prospects, clients remaining in work, avoiding homelessness and improved health meaning less pressure on mental health and GP's surgeries.

The value of Citizens Advice Services goes beyond purely economic values and our intervention has profound effects on clients' health and wellbeing, with more than

³ Bright, R: CAED Client Satisfaction Survey September 2016

⁴ Citizens Advice "Helping People Find a Way forward 2015/6"

⁵ Citizens Advice National Outcomes and Impact Research, 2014.

50% in a recent local study reporting an improvement in their mental health following our intervention and 34% reporting fewer visits to their GP⁶.

Last year, CAED's 56 frontline volunteers provided an average of 209 volunteer hours per week or 10,686 hours a year giving advice to their local community, and together with support volunteers, the contribution was 295 volunteer hours a week. This is the equivalent of having 6 FTE advice staff and another 2 – 3 support staff working across East Devon.

The value of volunteers' time in frontline activities equates to £181,213⁷. This does not include the time given by the Family Law Co solicitor which is estimated at over £10,000⁸, nor does it include the value of time given by our highly experienced and committed Trustee Board which supports the service through subcommittees, strategic direction on the main board and through networking and community activities.

In addition, the training investment in our volunteers can be measured against values given by the national charity⁹. This estimates that it takes an average of £2,800 to recruit and train a frontline volunteer¹⁰ and when multiplied against our 56 volunteers gives us an estimated asset value for our volunteer workforce of £156,800.

Furthermore, we train and improve the skills of our volunteers¹¹, improving the employment opportunities for those of working age and providing those of retirement age with an opportunity to continue to use their skills and experience to make a positive contribution to their community.

How we are funded

We are dependent on grants and donations to keep our service going. In 2016/17 33% of our funding came from EDDC's grant, with a further 29% coming in the form of a grant from Devon County Council. We obtained over £39,000 in project funding in the same period and anticipate project funding will exceed £40,000 in 2017/18.

Our core grant is vitally important to us; unlike project funding, which usually funds specific and innovative work streams, our core funding supports the provision of some of our most essential areas of work, like supporting clients with benefits and

⁶ Jaynes, B: Proving the value of advice services in Devon, July 2015.

⁷ This figure is calculated using a matrix provided by the national charity which values volunteers time based on their current or most recent paid employment.

⁸ 48 hours per year at the partner charge out rate of £220 per hour = £10,560.

⁹ "CAB Volunteering – How everyone benefits" CitA Impact Team Report (2014)

¹⁰ Figure is averaged against all frontline volunteer roles as per CAB Impact Team Report, ibid.

¹¹ Citizens Advice "The Value of Volunteering (2014)" reports that 9 out of 10 volunteers gained more than one new life skill and 8 out of 10 volunteers of working age thought that volunteering improved their employment prospects.

debt issues, employment difficulties or homelessness. Independent research has shown that: *“a lack of core funding can cause or compound other organisational challenges, including: staff shortages; inappropriate premises; and a lack of capacity to meet beneficiary demand.”*¹² In a challenging funding environment, we are seeking to take advantage of diverse funding streams and ensure that we deliver value for money.

Looking forward: 2017/8 and beyond

Citizens Advice East Devon is currently undertaking a three year review of its services and is looking to produce a new service development plan which takes into account the needs of clients in East Devon and will further tailor our support to meet those needs in the most effective way. We are actively seeking to involve clients and other key stakeholders in designing services going forward. We are committed to working in partnership with our local authorities and with organisations from the third sector who share our aims to further improve our services and provide joined up solutions to people’s problems.

We anticipate that demand for our services will remain high and will probably increase as a result of the increased pressure on public services and the full roll out of Universal Credit in Devon in 2017/18.

A recent grant from the National Lottery is enabling us to tackle the problem of digital exclusion, helping people with limited IT skills or poor internet connectivity to access support online and improve their life skills and resilience. With our partner organisations, we are looking to support people who often struggle to find help elsewhere, such as carers, those in fuel poverty and disabled people. A recent partnership with Action East Devon is enabling us to provide support and education to those with life-limiting conditions through the “Passing Matters” project.

We actively seek to involve people from a wide variety of backgrounds and experience both to come to us for help and to participate in delivering our services and so ensure that we continue to be able to provide vital support to our community in East Devon.

**Citizens Advice East Devon
30 June 2017**

¹² Cairns, Mills & Ridley: Institute for Voluntary Action Research “Thinking about core funding” (2013)

Citizens Advice Local Authority Dashboard 2017



East Devon

Citizens Advice Service England and Wales 2016/17:

	2016/17
Unique clients advised	2m
Problems dealt with	5.7m
Community locations	2,400

East Devon in 2016/17

Citizens Advice Bureaux dealt with:

	2016/17
Clients	4,223
Problems	11,193

The main problem areas were:

	2016/17	
	Problems	%
Benefits	4,429	40%
Debt	1,785	16%
Employment	804	7%
Housing	894	8%

The top 5 benefit issues were:

	2016/17	
	Problems	%
Personal independence payment	975	22%
Employment Support Allowance	865	20%
Working & Child Tax Credits	397	9%
Housing Benefit	324	7%
Attendance Allowance	166	4%

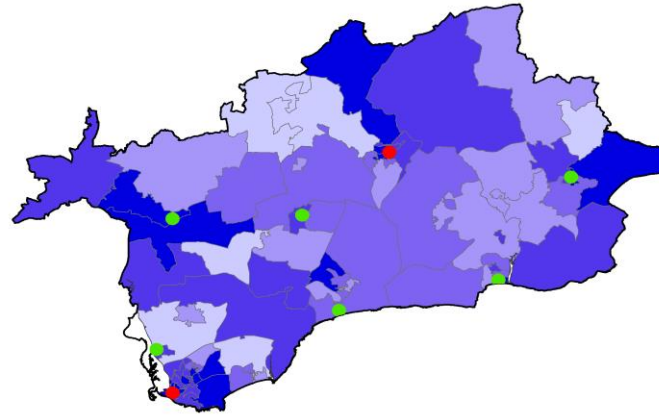
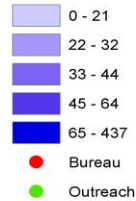
The top 5 debt issues were:

	2016/17	
	Problems	%
Credit, store & charge card debts	239	13%
Debt Relief Order	174	10%
Council tax arrears	172	10%
Water supply & sewerage debts	141	8%
Unsecured personal loan debts	127	7%

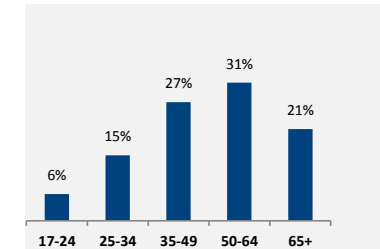
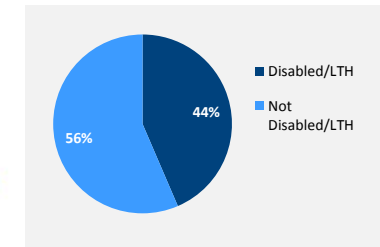
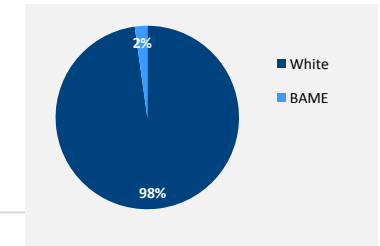
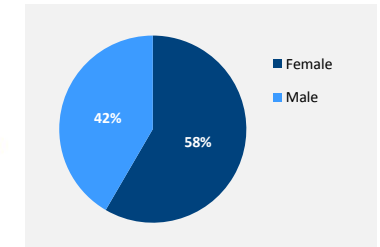
Key housing issues:

	2016/17	
	Problems	%
Actual homelessness	43	5%
Threatened homelessness	111	14%

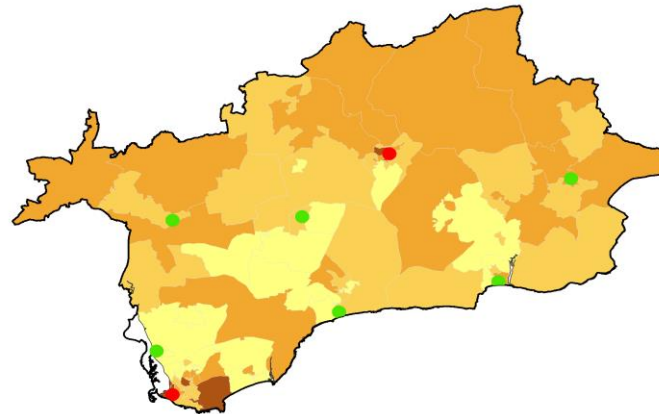
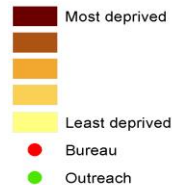
Clients



Client Profile:



English Deprivation Rank



Source: IMD 2015. Contains OS data © Crown copyright and database right 2016

Citizens Advice East Devon; Income and Expenditure 2016/7

Income & Expenditure	I & E 2016/7
Income	
Income from Core funders	
EDDC	£63,464.00
DCC	£54,414.00
Parish and Town Councils	£5,330.00
Investments	£2,059.00
Fundraising and other activities	£24,923.00
Project Funding	£39,312.00
Total Income	£189,502.00
Expenditure	
Salaries	£126,027.00
Staff Costs	£13,609.00
Office Costs	£20,654.00
Premises Costs	£22,006.00
Governance	£12,520.00
Other Costs	£2,084.00
Total expenditure	£196,900.00
Deficit/I/E	-£7,398.00

Reserves As At 01/04/2016	£	40,299.00
Reserves As At 31/03/2017	£	32,902.00

Recommended minimum level of reserves as per reserves policy **£30,000.00**

Citizens Advice East Devon; Budget Summary 2017/8	
Income & Expenditure	Approved Budget 2017/8
Income	
Income from Core funders	
EDDC	£64,112.00
DCC	£50,514.00
Parish and Town Councils	£10,350.00
Fundraising and other activities	£14,013.00
Project Funding	£40,952.00
Total Income	£179,941.00
Expenditure	
Salaries	£96,939.00
Staff Costs	£4,881.00
Office Costs	£16,599.00
Premises Costs	£31,297.00
Governance	£11,062.00
Other Costs, including training and volunteer travel expenses	£18,804.00
Total expenditure	£179,582.00
Surplus/I/E	£359.00
Reserves As At 01/04/2017	£32,902.00
Projected Reserves As At 31/03/2018	£33,261.00
Recommended minimum level of reserves as per reserves policy	£30,000.00

CITIZENS' ADVICE BUREAU GRANTS - 5 years ending 31 March 2018

EDDC has an agreement to pay a grant to East Devon CAB. This is paid in two tranches. 90% is paid at the start of the financial year (April) and the balance is paid the following March. The level of grant awarded is calculated as follows:

	2017/18 £	2016/17 £	2015/16 £	2014/15 £	2013/14 £
<p>Prior year base budget x inflation (as used in the budget process) + 5 hours of Trainer at SCP 24 + 5 hours of Debt Manager at SCP 24 + 10 hours of Clerical Assistant at SCP 16 x 47.5%</p>					
EAST DEVON					
Base Budget 2012/13	-	-	-	-	71,518.82
Base Budget 2013/14	73,664.38	73,664.38	73,664.38	73,664.38	-
Inflation increase at 3%	-	-	-	-	2,145.56
Inflation increase at 1%	736.64	-	-	-	-
	<u>74,401.02</u>	<u>73,664.38</u>	<u>73,664.38</u>	<u>73,664.38</u>	<u>73,664.38</u>
Trainer Post (5 hours per week)	2,967.85	2,938.60	2,909.50	2,875.71	2,846.84
Debt Manager Post (5 hours per week)	2,967.85	2,938.60	2,909.50	2,875.70	2,846.84
Adjustment in CAB favour re: late pay increase	-	-	-	0.72	-
	<u>80,336.72</u>	<u>79,541.58</u>	<u>79,483.38</u>	<u>79,416.51</u>	<u>79,358.06</u>
Grant at 47.5% of above	38,159.94	37,782.25	37,754.61	37,722.84	37,695.08
EXMOUTH					
Base Budget 2012/13	-	-	-	-	47,994.03
Base Budget 2013/14	49,433.85	49,433.85	49,433.85	49,433.85	-
Inflation increase at 3%	-	-	-	-	1,439.82
Inflation increase at 1%	494.34	-	-	-	-
	<u>49,928.19</u>	<u>49,433.85</u>	<u>49,433.85</u>	<u>49,433.85</u>	<u>49,433.85</u>
Clerical Assistant(10 hours per week)	4,707.80	4,632.20	4,586.30	4,535.72	4,487.63
Adjustment in CAB favour re: late pay increase	-	-	-	3.61	-
	<u>54,635.99</u>	<u>54,066.05</u>	<u>54,020.15</u>	<u>53,973.18</u>	<u>53,921.48</u>
Grant at 47.5% of above	25,952.10	25,681.37	25,659.57	25,637.26	25,612.70
COMBINED GRANT	64,112.04	63,463.62	63,414.18	63,360.10	63,307.78
<i>Paid or Payable:</i>					
First month of financial year (April) - 90%	57,700.84	57,117.26	57,072.76	57,020.57	56,977.00
Last month of financial year (March) - 10%	6,411.20 *	6,346.36	6,341.42	6,335.62	6,330.78
Last month of financial year (March) - Pay award adjustment	0.00	0.00	0.00	3.91	0.00
	<u>64,112.04</u>	<u>63,463.62</u>	<u>63,414.18</u>	<u>63,360.10</u>	<u>63,307.78</u>

* £6,411.20 due to be paid March 2018

SALARY WORKINGS TO SUPPORT ABOVE FIGURES					
EAST DEVON					
Trainer and Debt Manager Posts					
Spinal Column Point (SCP) at beginning of year	24	24	24	24	24
Pay Award for year included in full-time salary below	Yes	Yes	Yes	No	No
Number of hours worked per week	5	5	5	5	5
	£	£	£	£	£
Full Time Salary (37 hours per week)	21,962.00	21,745.78	21,530.47	21,067.00	20,858.00
Rate per hour per week	593.57	587.72	581.90	569.38	563.73
Rate for 5 hours per week	2,967.85	2,938.60	2,909.50	2,846.90	2,818.65
+ 1% estimated pay award	n/a	n/a	n/a	28.47	28.19
+ finalised pay award (extra to above)	n/a	n/a	n/a	0.33	n/a
	<u>2,967.85</u>	<u>2,938.60</u>	<u>2,909.50</u>	<u>2,875.70</u>	<u>2,846.84</u>
EXMOUTH					
Clerical Assistant					
Spinal Column Point (SCP) at beginning of year	16	16	16	16	16
Pay Award for year included in full-time salary below	Yes	Yes	Yes	No	No
Number of hours worked per week	10	10	10	10	10
	£	£	£	£	£
Full Time Salary (37 hours per week)	17,419.00	17,138.98	16,969.29	16,604.00	16,440.00
Rate per hour per week	470.78	463.22	458.63	448.76	444.32
Rate for 10 hours per week	4,707.80	4,632.20	4,586.30	4,487.60	4,443.20
+ 1% estimated pay award	n/a	n/a	n/a	44.88	44.43
+ finalised pay award (extra to above)	n/a	n/a	n/a	3.24	n/a
	<u>4,707.80</u>	<u>4,632.20</u>	<u>4,586.30</u>	<u>4,535.72</u>	<u>4,487.63</u>



Scrutiny Committee received a presentation on modern day slavery on the 30 March 2017; subsequently a training session for all members was run on the 21 June 2017.

At their meeting on the 22 June, a request was made to enquire how the services within the council were also being made aware of the issue. This brief update report sets out the work already undertaken within services.

The Council has adopted a joint policy, as adopted by all district councils in the county, on safeguarding. In broad terms the policy commitment is that all councils signed to this policy believe that all children, young people and adults have the right to be safe, happy and healthy and deserve protection from abuse. The policy is implemented across all levels of the council, including lead officers in place for reference points for those staff in day-to day contact with the public. Clear procedures are in place to follow if an issue of safeguarding is identified, including on making a formal referral, confidentiality and consent.

Training for front line staff is undertaken on a regular basis. Most recently, for example, some staff undertook specific modern day slavery awareness training in November of last year; and “safeguarding alerter” training from Devon County Council in February of this year included the topic. Those key staff have disseminated information to their teams.

In researching this issue, I have found a clear awareness of the issues apparent with some staff but there is always room for improvement.

I would recommend that a request be made to the Strategic Management Team to review the issue, as an operational one, to satisfy itself that staff are adequately trained.

**Debbie Meakin
Democratic Services Officer**

Agenda Item 10**Scrutiny Committee****Scrutiny Committee Forward Plan 2017/18**

Date of Committee	Report	Lead
24 Aug 2017	Meeting not required	
21 Sept 2017	Update on implementation of new Recycling and Waste Contract Complaints and FOI report 1 st quarter performance management report	Andrew Hancock Henry Gordon Lennox
19 Oct 2017	Service Lead Planning Strategy and Development Management report back on performance indicator queries and new working practices	Ed Freeman
16 Nov 2017	2 nd quarter performance management report	
17 Jan 2018	Draft budget and service plans with Overview	
22 Feb 2018	3 rd quarter performance management report	
22 March 2018		
19 April 2018	Agreement on annual report to Council	Debbie Meakin

Work for allocation to the Forward Plan as appropriate:

Proposed date	Topic
tbc	Portfolio Holder update reports being sought; committee can then subsequently ask the PH to attend committee on specific aspects of their portfolio. These will be programmed in once PH posts are confirmed at Annual Council
Broadband and mobile coverage	As and when updates are available

Topics put forward for scoping on 9 May were:

- How sites are put forward for the Local Plan or for future plans, such as the GESP;
- Building regulation limits of internal room sizes; in particular for houses of multiple occupation;
- Multiple consultation examples had been considered previously by the committee, but the consultation process still remained a guide and not a policy;
- The role of the District Councillor in communication with local Town or Parish Councillor in dissemination of information from a district level (as linked to consultation on changes in service provision or charges that impact at a local level).

Topics determined to date:

- Review of the procurement approach agreed by the Housing Review Board at their meeting of 9 March 2017: At their meeting on 9 March, HRB noted the progress of the alternative models for building and repairs maintenance service, being undertaken under a procurement approach. No approach has yet been agreed, as a final report back on that approach is yet to be reported to the Board. The review of any such arrangement for entering into new contracts for building and repairs maintenance will fall under the remit of the Board as an overview and scrutiny committee in its own right. Therefore this topic cannot be reviewed by the Scrutiny Committee;
- Building regulation limits of internal room sizes; in particular for houses of multiple occupation: Building regulations are not determined locally – this falls to the Department for Communities and Local Government. They publish guidance, referred to as “Approved Documents” on ways to meet building regulations. At present, there are only regulations relating to room size for new builds of student accommodation, hotels, and schools. The building regulations as a whole cover the health and safety standards of buildings, energy conservation and access and facilities for disabled people. The Chairman has also raised the issue of building control being undertaken by other firms, and if their checks are as stringent as the building control service offered by the Council. Following legislation changes some years ago, the council’s Building Control team now have to compete with the private sector for this work.

The only possible route that the Democratic Services Officer can identify is, if the Committee have concerns about this issue, to lobby government with their concerns.