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To: The Chair and Members
of the Cabinet

County Hall
Topsham Road
Exeter
Devon
EX2 4QD

Date: 30 November 2021

Contact: Karen Strahan, 01392 382264

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CABINET

Wednesday, 8th December, 2021

A meeting of the Cabinet is to be held on the above date at 10.30 am in the Council Chamber - County Hall to consider the following matters.

Phil Norrey
Chief Executive

A G E N D A

PART I - OPEN COMMITTEE

1 Apologies for Absence

2 Minutes

Minutes of the meeting held on 10 November 2021 (previously circulated).

3 Items Requiring Urgent Attention

Items which in the opinion of the Chair should be considered at the meeting as matters of urgency.

4 Announcements

5 Petitions

6 Question(s) from Members of the Council

FRAMEWORK DECISIONS

NIL

KEY DECISIONS

7 Target Budget and Service Targets for 2022/2023

The Report of the Director of Finance on the Target Budget and Service Targets for 2022/2023 will follow.

Electoral Divisions(s): All Divisions

8 Approval of a Framework for prioritising 20mph projects (Pages 1 - 6)

Report of the Chief Officer for Highways, Infrastructure Development, (HIW/21/82) setting out a proposed framework for assessing and prioritising requests for 20 mph Speed Limits, attached.

Electoral Divisions(s): All Divisions

9 Future of North Devon Link Service (Pages 7 - 46)

Report of the Locality Director (Health and Care) (ACH/21/139) on proposals for the future of North Devon Link Service, attached.

An Impact Assessment is also attached for the consideration of Members at the meeting.

Electoral Divisions(s): All Divisions

MATTERS REFERRED

10 **Corporate Infrastructure and Regulatory Services Scrutiny Committee - Treasury Management Stewardship - Mid Year Position (Pages 47 - 54)**

Report of the Director of Finance (DF/21/11) outlining the Council's Treasury Management Mid-Year Stewardship 2021/22, which updates on key matters arising from the Council's Treasury and Debt Management activities during the first seven months of the 2021/22 financial year, previously considered and endorsed by the Corporate Infrastructure and Regulatory Services Scrutiny Committee on 18th November 2021 (Minute *23 refers). The Report is attached.

Recommendation

That Cabinet further endorse the Treasury Management Mid-Year Stewardship 2021/22 Report.

Electoral Divisions(s): All Divisions

11 **Children's Scrutiny Committee - In Year Budget Position**

The Children's Scrutiny on 9 November 2021 had considered the Report of the Chief Officer for Children's Services (CS/21/17) on the In Year Budget Position and had RESOLVED '(a) that the Committee thanks the Cabinet Member and the Chief Officer for their prudent financial management over a very difficult year; and (b) that the Committee asks Cabinet to ensure sufficient funding for Children's Services in the 2022/23 Budget to take account of rising demand, pressure on services, ongoing improvement related projects and to minimise future overspend and further asks that there is sufficient capacity in the Council to complete a process-mapping exercise of the Eclipse Social Care Case Management System.

Recommendation

(a) that Cabinet recognises the work of the Chief Officer and Cabinet Member in their prudent financial management over what has been a very challenging year and thanks them for their efforts as well as the work of the Children's Scrutiny Committee in holding both to account; and

(b) that Cabinet furthermore places on record its thanks the Children's Scrutiny Committee for their comments and will be working through the budget setting process to ensure, as far as practicable, that the 2022/23 budget takes account of rising demand, pressures on services and the planned improvement projects to minimise any future overspend.

OTHER MATTERS

- 12 Torbay and Devon Safeguarding Adults Partnership - Annual Report (Pages 55 - 72)

Annual Report of the Chair of the Torbay and Devon Safeguarding Adults Partnership, attached.

Mr Paul Northcott will be in attendance (via Teams) to present their Report.

Electoral Divisions(s): All Divisions

STANDING ITEMS

- 13 Question(s) from Members of the Public

- 14 Minutes

Minutes of the bodies shown below are circulated herewith for information or endorsement as indicated therein (i.e. any unstarred minutes):

- a Devon Audit Partnership - 15 November 2021 (Pages 73 - 78)
- b Devon Education Forum - 17 November 2021 (Pages 79 - 90)
Including endorsement of Minute 17(a) and 17(b) in relation to proposals for the 2022-23 Schools Revenue Funding Formula.
- c Farms Estate - 29 November 2021
The minutes will be published here shortly.
<https://democracy.devon.gov.uk/ieListDocuments.aspx?CId=163&MId=4229>

- 15 Delegated Action/Urgent Matters

The Register of Decisions taken by Members under the urgency provisions or delegated powers is available on the website in line with the Council's Constitution and Regulation 13 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012. The decisions taken and associated information can be found [here](#).

- 16 Forward Plan (Pages 91 - 100)

In accordance with the Council's Constitution, the Cabinet is requested to review the list of forthcoming business (previously circulated) and to determine which items are to be defined as key and/or framework decisions and included in the Plan from the date of this meeting.

The [Forward Plan is available on the Council's website](#).

**PART II - ITEMS WHICH MAY BE TAKEN IN THE ABSENCE OF THE PRESS
AND PUBLIC**

NIL

Members are reminded that Part II Reports contain exempt information and should therefore be treated accordingly. They should not be disclosed or passed on to any other person(s). They need to be disposed of carefully and should be returned to the Democratic Services Officer at the conclusion of the meeting for disposal.

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Declarations of Interest for Members of the Council

It is to be noted that Members of the Council must declare any interest they may have in any item to be considered at this meeting, prior to any discussion taking place on that item.

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Induction Loop available



Approval of a framework for prioritising 20mph projects

Report of the Chief Officer for Highways, Infrastructure Development and Waste

Please note that the following recommendations are subject to consideration and determination by the Cabinet (and confirmation under the provisions of the Council's Constitution) before taking effect.

Recommendation: that the Cabinet be asked to:

- (a) approve the framework for assessing and prioritising requests for 20 mph Speed Limits for use in the preparation of schemes for delivery in 2022/23 (pending agreement of budgets);
- (b) agree that amendments to the framework are delegated to the Chief Officer for Highways, Infrastructure Development and Waste in consultation with the Cabinet Member for Highway Management.

1. Summary

This report sets out the proposed framework for assessing and prioritising requests for 20 mph Speed Limits (20SPL).

2. Introduction

Newton Abbot 20 mph Pilot Scheme has been in progress since September 2019 and is intended to test whether introducing a default 20SPL will bring increased gains in;

- road safety by reducing the number and severity of collisions
- increased active travel and benefits to public health
- reduced congestion by improving traffic flows
- reduced emissions by encouraging modal shift for local trips by making walking and cycling safer and easier
- increased sense of public safety, making the streets accessible again to vulnerable road users who feel threatened by fast-moving traffic.

Requests for new 20SPLs continue to be received and are being added to a waiting list. There is a substantial desire from elected Members and residents to have 20SPL considered in their communities.

A budget is being sought for 20SPL schemes for 2022/23 from the Local Transport Plan or Section 106 contributions which should provide funding to progress a number of sites, depending on scale. It is proposed to assess and prioritise requests using the system proposed to establish a programme of works for 2022/23, which can then be utilised in future years subject to review. The proposed system conforms to current policy but introduces a wider range of factors to reflect the potential benefits and allow schemes to be progressed where there is greatest benefit, and need.

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3. Proposal

It is proposed that elected Members are invited to make representations for their communities where it is felt that the introduction of a 20SPL would be beneficial; this may be for the whole community or a discrete part of the community.

Requests will be reviewed against a framework, a copy of which is included at Appendix 1 and the proposals prioritised based on alignment with current Policy principles of:

- significant vulnerable road user activity
- mean speeds are low (24mph or below).

The framework includes additional factors to ensure that resource is directed to where there will be greatest benefit, including:

- speed related casualty collision history
- support from wider community
- active Community Speed Watch
- deprivation Index ranking
- existing Air Quality Management area.

All schemes will also be considered via safety audit prior to progression. The Framework is included at Appendix 1; however it is acknowledged that as proposals are considered, and depending on the volume it may be necessary to amend the scoring within the framework to provide separation between schemes.

4. Options/Alternatives

It is considered that it is not appropriate to delay delivery of Policy compliant requests for 20SPLs where budget is available. A prioritisation system is necessary as it is anticipated demand will exceed capacity to respond to requests and allows schemes to be progressed where the need and potential benefits are greatest, and to achieve best value.

The proposed framework incorporates elements adopted by other authorities, it supports partner organisations by considering matters relating to enforcement and air quality. For example, by considering mean speed and the presence of an active Community Speed Watch, pressure on Police resource to enforce will be reduced and residents can be empowered to affect driver behaviour in their own community.

Other options were considered but were not felt to be appropriate at this stage:

- Prioritising sites in order of population size and working down: This option would initially concentrate resource where more people benefit. However, this may not target areas with greatest need.
- Selecting geographical clusters: This may be a case of starting at one end of the authority area and working systematically across, or, picking groupings of communities through another mechanism. It has the benefit of creating a consistent approach to speed management across each area which can

improve compliance. However, it does not reflect the benefit that can be achieved compared to prioritising sites according to a proven need.

The Newton Abbot 20 mph Pilot Scheme will provide data and information which will enable and inform a review of the proposed system and DCC's 20SPL Policy.

5. Financial and Resource Considerations

A budget of £100k has been earmarked for 20SPLs for 2022/23 through the Local Transport Plan or Section 106 contributions where appropriate which will provide for a number of schemes.

6. Legal Considerations

The proposal is to apply existing County Policy with additional scoring mechanism to ensure resource is directed with best effect.

There are no specific legal considerations.

Speed Limits must be set in accordance with the procedures set out in the Road Traffic Regulation Act 1984 (as amended).

7. Environmental Impact Considerations (Including Climate Change)

It is expected that introducing appropriate 20SPLs will offer a positive environmental impact by increased active travel; reduced congestion by improving traffic flows; and, reduced emissions by encouraging modal shift for local trips by making walking and cycling safer and easier.

The inclusion of Air Quality Management areas in the prioritisation framework will assist in targeting areas where there will be gains in this respect.

8. Equality Considerations

It is expected that introducing appropriate 20SPLs will assist in community cohesion and focus resources to areas where there is a higher risk of residents being affected by road safety matters. By including within the framework the Index of Mass Deprivation should help prioritise those areas with greatest need.

9. Risk Management Considerations

The proposal is compliant with the existing County Policy. However, an additional scoring mechanism has been included to ensure resource is directed with best effect.

All schemes will also be considered via safety audit prior to progression.

No risks have been identified.

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10. Public Health Impact

It is expected that introducing appropriate 20SPLs will offer a positive public health impact by increased active travel; improvements in air quality as a consequence of reduced congestion by improving traffic flows; and reduced emissions by encouraging modal shift for local trips by making walking and cycling safer and easier.

11. Conclusions

The proposal allows for the gathering and prioritisation of requests for new 20SPLs from elected Members and communities. This will remove the current frustration that all new schemes must await the outcome of the Newton Abbot 20 mph Pilot Scheme.

The proposal uses a simple mechanism for prioritising schemes where the need and potential benefits are greatest.

In the longer term future changes to the speed Policy and any decision to roll out 20SPLs on a default basis will be informed by the Newton Abbot 20 mph Pilot Scheme.

Meg Booth

Chief Officer for Highways, Infrastructure Development and Waste

Electoral Divisions: All

Cabinet Member for Highway Management: Councillor Stuart Hughes

Local Government Act 1972: List of Background Papers

Contact for Enquiries: Chris Rook

Tel No: 01392 383000 Room: County Hall, Exeter. EX2 4QD

Background Paper
Nil

Date

File Reference

Approval of a framework for prioritising 20mph projects - Final

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Appendix 1 to HIW/21/82 - 20 mph Assessment System

Name of Community / Location*			
Community Support (via local Elected Member and Local Town/Parish Council)		Pass / Fail	
POLICY COMPLIANCE		Score	Sub Total
Traffic Speed (85th%ile)			
Below 24 mph		4	
25-30 mph		2	
Above 31 mph		0	
Speed Related Injury Collision (3 year record)			
Each Slight		1	
Each Serious		2	
Each Fatal		3	
Vulnerable Road Users / Environment			
School/Playground		1	
Health/Social Care Facility		1	
Community Facility		1	
Footway both sides		-1	
Footway one side		0	
No Footway		1	
Pedestrian crossing		-1	
OTHER FACTORS			
Air Quality Management Areas (AQMA)		2	
Community Speed Watch Scheme		2	
Road Character			
A road		0	
B road		1	
C class road		2	
Unclassified road		0	
Index of Multiple Deprivation			
Decile 1 and 2		5	
Decile 3 and 4		3	
Decile 5 and 6		0	
Decile 7 and 8		-3	
Decile 9 and 10		-5	
Total Score			

*Where multiple sections of highway are proposed for 20SPL, assessment will be made on representative length(s).

NORTH DEVON LINK CENTRES

Report of the Locality Director (Care and Health), Devon County Council and NHS Devon CCG

Please note that the following recommendations are subject to consideration and determination by the Cabinet (and confirmation under the provisions of the Council's Constitution) before taking effect.

RECOMMENDATIONS

Cabinet is asked to agree the following recommendations:

1. Re-open three of the four Link Centre buildings (Barnstaple, Bideford and Ilfracombe) as soon as it is deemed safe to do so under Covid-19 guidelines.
2. Holsworthy centre to remain closed and move the once-weekly morning drop-in session to an alternative venue in the town.
3. A local implementation plan and timeframe for redesign of the service to be developed for each centre, including efficiency and management arrangements. Link Centre staff to increasingly focus on outreach support with the mental health social work teams
4. Work with the Link Centre staff, service users, local Councillors and local community and voluntary sector representatives to establish:
 - a. the outreach services to be delivered in the wider community to ensure equity of provision across all of North Devon. This may include using other community facilities
 - b. which of the existing non-specialist services can be delivered by local community providers. These will need to be cost-effective and within the available budget.
5. Each local implementation plan to assess the potential for wider community use of the building in partnership with local stakeholders
6. Progress on each of the four local implementation plans is reported to Adult Care and Health Scrutiny Committee at its meeting scheduled for 21 March 2023

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## 1. SUMMARY

- 1.1. This report sets out the recommended future model for the North Devon Link Centre Service (NDLS) based on findings from a service review, the impact of Covid-19, and feedback received in the engagement and consultation process.

## 2. BACKGROUND

- 2.1 The North Devon Link Service is unique to North Devon, established in 1992 as a Devon County Council (DCC) in-house service.
- 2.2 The service supports people with a wide range of mild mental health needs, is open to all and is free to access. In addition to mental health concerns, people using the service may also have autism, a learning disability, be homeless or receiving support for substance misuse.
- 2.3 The Link Service is part of the health and care system supporting mental health needs across Northern Devon. Other services include: Community Mental Health Teams, Mental Health Social Work Teams, crisis services such as The Moorings Crisis Café, a 24-hour support phone line from Mental Health Matters and Devon Partnership Trust's First Response Service. The Link Service does not provide urgent or crisis support.
- 2.4 Approximately 50% of people who are currently supported by the Link Service are also in receipt of other health and social care community services delivered by Devon Partnership Trust.
- 2.5 There are four centres across North Devon (Barnstaple, Bideford, Holsworthy and Ilfracombe) supporting 264 registered service users. The service provides a traditional drop-in day service together with some outreach and group sessions. The outreach sessions aim to build confidence to encourage people to attend the centres, and the group sessions focus on wellbeing.
- 2.6 The service is the responsibility of the Council but is managed by Devon Partnership Trust (DPT) under a Section 75 Agreement. The service costs £480k per year to run (mostly staff costs), funded by the Council, which also owns the buildings.
- 2.7 Like many day centres, since the beginning of the Covid-19 pandemic, the service has moved from face to face to virtual support, mostly by telephone.
- 2.8 Since December 2020, alongside virtual support, staff have been working with the DPT North Devon Mental Health Social Work Teams to provide



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short-term support for people in addition to those registered with the Link Service.

2.9 A 2019 review of the Link Service found that many of the services offered were not specialist and were also offered by the local community and voluntary sector: for example, access to IT, classes, support for loneliness and isolation, and help with form-filling.

2.10 A further review was undertaken in May 2021 to understand the impact of Covid-19 on the service.

2.11 In line with local guidance and whilst Covid rates remain high in Devon, the buildings remain closed.

## 3. PROPOSAL TO REDESIGN THE SERVICE

3.1 There is a national focus on improving and developing the way we deliver community mental health services, including national investment and the introduction of the Community Mental Health Framework.

3.2 Following the review findings that many of the Link Centre services could be delivered by the community and voluntary sector, an outline proposal to redesign the service was developed.

3.3 An engagement process with service users, stakeholders and staff took place between 9 August and 13 September 2021 on that original proposal.

3.4 Feedback from the engagement was heeded and a revised proposal was developed to take to public consultation:

‘Redesign the North Devon Link Service to become a community offer that continues to meet the needs of people with varying levels of support, in a wider variety of accessible community settings across Northern Devon. We will continue to run the current service whilst those other services are set up, to ensure no one is left without the support they currently receive’.

## 4. CONSULTATION

4.1 The four-week public consultation took place between 23 September and 22 October 2021, alongside a staff consultation supported by HR.

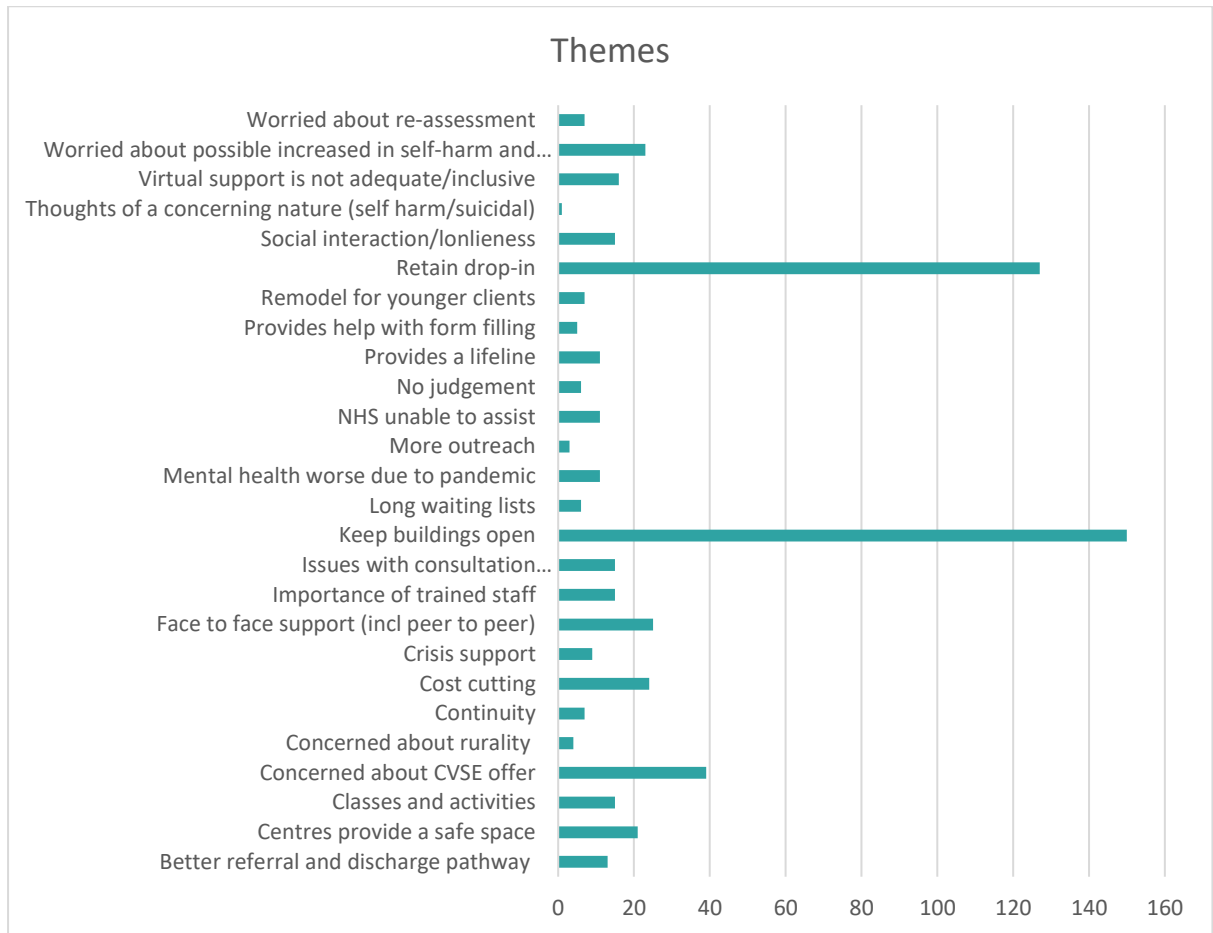
4.2 Recognising that people who use the North Devon Link Services may be unable to access IT, a copy of the questionnaire with a pre-paid envelope was posted to all service users.

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- 4.3 Link Centre staff, all referrers to the service, and the community mental health teams were consulted and they also encouraged and supported service users to respond.
- 4.4 The Cabinet member for care and health met with local MPs, and he and the Locality Director for North and East Devon met with county councillors representing each of the four towns during the engagement period.
- 4.5 All North Devon GP practices and practice managers were contacted direct. DCC and DPT officers attended the Northern Integrated Delivery Group and a public stakeholder meeting with practice managers, patient representatives and other stakeholders.
- 4.6 Three online public events were held, including one in the evening following public feedback, and three staff consultation events.

## 5 SUMMARY OF PUBLIC CONSULTATION FEEDBACK

- 5.1 256 responses were received: 41 by post, 49 by e-mail, 144 via the Council Have your Say webpage and 22 by social media. In some instances, duplicate responses were made through more than one route. The webinars were less well-attended, with 9 attendees in total.
- 5.2 Two on-line petitions against the closure of the Link Centres were established on [www.change.org](http://www.change.org). As of 27 October, there were 357 signatures on the petition relating to the four centres, and 17 signatures on the petition specific to Barnstaple.
- 5.3 69% of respondents did not agree with the proposal but offered no alternative. 29% did not agree and suggested alternatives, and 2% of responders agreed with the consultation proposal. Themes of the responses are shown below:



- 5.4 A consistent message in the feedback was that any significant change in the services offered at the Link Centres would have a detrimental impact on the mental wellbeing of attendees.
- 5.5 Respondents overwhelmingly advocated for the drop-in sessions to remain, citing them as a way to reduce loneliness and isolation, and considered a 'safe space' where individuals did not feel judged.
- 5.6 Alternative options suggested through the public and staff consultations were considered alongside the analysis of wider feedback and are shown in the table below:

|   | Options considered                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Care Act eligible service delivered by specialist staff                            | Accessible local services delivered by VCS                  | Good use of resource                                                                                                                                           | Promoting Independence | Listening to consultation feedback                                                                 | Total       |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------|-------------|
| 1 | <p>Consultation proposal</p> <ul style="list-style-type: none"> <li>• <b>Buildings remain closed</b></li> <li>• continue to support existing service users remotely</li> <li>• remainder of the staff to the short-term enabling work with the ND MH Social Work Teams.</li> <li>• Investment in CVS for the provision of services to others across a wider areas of Northern Devon.</li> <li>• Reviews/assessment undertaken to ensure people are receiving the right support.</li> </ul> | <p>4</p> <p>This will be 5 in the longer term when CVS services are developed.</p> | <p>3</p> <p>CVS support will take some time to develop.</p> | <p>3.5</p> <p>DCC buildings will be empty whilst using other facilities.</p> <p>Specialist staff will eventually be delivering solely a statutory service.</p> | <p>5</p>               | <p>0</p> <p>The buildings will remain closed with no drop in.</p>                                  | <p>15.5</p> |
| 2 | <ul style="list-style-type: none"> <li>• <b>Buildings remain closed</b></li> <li>• NDLS staff delivering the short-term enabling work with the MH Social Work Teams.</li> <li>• Investment in CVS for the provision of services to others across a wider area of Northern Devon.</li> <li>• Quickly instigate reduced drop-in services in each town in alternative buildings delivered by CVS whilst further development is carried out.</li> </ul>                                        | <p>5</p>                                                                           | <p>3</p> <p>CVS support will take some time to develop.</p> | <p>3</p> <p>DCC buildings will be empty whilst using other facilities.</p> <p>Specialist staff will eventually be delivering solely a statutory service.</p>   | <p>4</p>               | <p>2</p> <p>The buildings will remain closed but there will be some drop delivered by the CVS.</p> | <p>17</p>   |

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |   |                                                                    |   |                                             |   |                             |     |     |                                                                                                               |                       |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--------------------------------------------------------------------|---|---------------------------------------------|---|-----------------------------|-----|-----|---------------------------------------------------------------------------------------------------------------|-----------------------|
|   | <ul style="list-style-type: none"> <li>Reviews/assessment undertaken to ensure people are receiving the right support.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |   |                                                                    |   |                                             |   |                             |     |     |                                                                                                               |                       |
| 3 | <p><b>To allow time to understand what alternatives are required and model resource required:</b></p> <ul style="list-style-type: none"> <li><b>Buildings re-open</b></li> <li>NDLS staff delivering the Care Act 2014 service with the Mental Health Social Care Team.</li> <li>NDLS staff will also deliver a reduced drop-in service in current NDLS buildings as a temporary measure</li> <li>Reviews/assessment undertaken to ensure existing NDLS service users are receiving the right support.</li> <li>Introduce referral criteria for new referrals to the drop in.</li> <li>Investment in CVS for the provision of services across a wider area of Northern Devon to include drop in, outreach, classes and groups.</li> <li>Change the model of service delivery to include volunteering and job opportunities and more offers for young people and more community use of the buildings.</li> <li>As CVS alternative services develop, NDLS staff to eventually solely deliver Care Act 2014 eligible enabling services</li> </ul> | 4 | This will be 5 in the longer term when CVS services are developed. | 3 | CVS support will take some time to develop. | 4 | DCC buildings will be used. | 3.5 | 3.5 | The buildings will open, a limited drop in will be delivered whilst developing services delivered by the CVS. | 18 – preferred option |

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                          |                                                                                                                                                                         |                                                                              |   |   |            |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|---|---|------------|
|   | with the mental health social work teams.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          |                                                                                                                                                                         |                                                                              |   |   |            |
| 4 | <ul style="list-style-type: none"> <li>• <b>Re-open the centres for at least as much time as previously open and preferably more often.</b></li> <li>• Add, or increase, opportunities for one-to-one counselling as much as staff availability allows.</li> <li>• <b>Open similar centres in the rest of Devon towns, building on the experience and success of the centres in North Devon.</b></li> <li>• Provide individual counselling in addition to, not instead of, attendance at the centres.</li> <li>• Consult the clients to see what more they would like.</li> </ul> | 0<br><br>There will be no delivery of a Care Act 2014 eligible services. | 1<br><br>The services would still only be available in the current towns not delivered by the CVS.<br><br>2<br><br>Services delivered over a wider area but not by CVS. | 1<br><br>Staff would not be delivery a statutory service.                    | 1 | 5 | 8<br><br>9 |
| 5 | <p><b>Staff proposal</b></p> <p><b>Mental Health surgery/hub held in community settings</b> signposting and proactive support working alongside the voluntary sector.</p> <ul style="list-style-type: none"> <li>• Include support for younger people.</li> <li>• A clear referral and discharge process.</li> <li>• Peer support to be developed so that it can eventually run itself.</li> <li>• Signpost to other services.</li> <li>• At the same time support the Mental Health Social work team.</li> </ul>                                                                 | 3<br><br>There will be less staff to deliver the Care Act 2014 service.  | 3<br><br>Services will be delivered across a wider geographical area.<br><br>Not delivered by the CVS.                                                                  | 3<br><br>Staff will only partly be running a Care Act 2014 eligible service. | 3 | 2 | 14         |

## 7. FINANCIAL CONSIDERATIONS

- 7.1 The cost of running the centres is currently £480k per year. There are no plans to reduce investment.

## 8. LEGAL CONSIDERATIONS

- 8.1 The lawful implications of the proposal have been considered and taken into account in the preparation of this report on the proposal set out above. The legal considerations include Devon County Council's statutory responsibility to provide a service to people who are eligible for services under the Care Act 2014, a legal responsibility to carry out consultation with staff lasting 30 days and a full and meaningful engagement and consultation process with service users and stakeholders.

## 9. ENVIRONMENTAL IMPACT CONSIDERATIONS (INCLUDING CLIMATE CHANGE)

- 9.1 We want people to lead meaningful lives within their communities. There are clear social and economic benefits in supporting all adults to live as independently as possible. Environmental impact considerations will be looked at as part of the impact assessment.

## 10. EQUALITY CONSIDERATIONS

- 10.1 We want people with health and care needs to have the same opportunities as everyone else and to lead meaningful lives in their communities. An impact assessment has been completed.

## 11. RISK MANAGEMENT CONSIDERATIONS

- 11.1 This proposal has been assessed and all necessary safeguards or action have been taken to safeguard the Council's position. In addition, work is underway with the Community Mental Health Teams to support discharge options, alongside the development of support within the community and voluntary sector. The project risk register has been updated as appropriate.

## 12. PUBLIC HEALTH IMPACT

- 12.1 Public Health are taking forward actions developed across the wider Council to support people to live as independently as possible within their communities and to reduce health inequalities. Our proposal aligns with *Healthy and Happy Communities*, Devon's Joint Health and Wellbeing Strategy 2020 to 2025.

# Agenda Item 9

Tim Golby

Locality Director (North and East), Devon County Council and Devon Clinical Commissioning Group

Electoral Divisions: North Devon and Torridge

Cabinet Member for Cabinet Member for Adult Social Care and Health Services:

Councillor James McInnes

Chief Officer for Adult Care and Health: Jennie Stephens

## **Local Government Act 1972: List of Background Papers**

Contact for Enquiries: Sarah Dent, Commissioning Development Officer

Tel No: 07970285320

### **Background Paper**

### **Date**

### **File Reference**

Equality Impact Assessment

<https://www.devon.gov.uk/impact/published/>

Public Consultation Document

[North Devon Link MH Service Public Consultation document - final 22.9.21](#)



## **Appendix 1 Key findings from July 2019 review**

Centre staff are committed and passionate about what they do.

The service is provided to people from across the mental health spectrum from little need to those who meet the secondary mental health threshold.

Some people had been attending the service for up to 20 years, some on and off as they needed support, but others continuously as a place to socialise and receive support.

Most people who used the service were between 41 and 65, suggesting that the service provision is not the support that younger people require.

There was no admission or discharge criteria.

At the time of the review only 11% of service users had been identified as being potentially eligible under the Care Act 2014 and 43.25% of service users in receipt of another DPT service. The Community Mental Health Teams (CMHT) were the main referrers, using the NDLS for monitoring people discharged from their caseload.

A survey of people who use the service said they used the centres as a place to meet other people and feel safe, supported and listened to. Their friends go there, and they don't need to pay for it. Some people identified other groups outside of the Link Centre that they would like to see developed and other wanted more activities to be provided in the Centre.

# Agenda Item 9

## **Appendix 2 Key findings from Impact of Covid-19 review**

Feedback on the revised service model operating during the Covid-19 pandemic was sought from people who use the NDLS service (October '20 survey) and from staff working in and/or connected to the centres (Summer '20, April '21). The response to the survey from service users was very low, with feedback mostly from people who access the service to combat loneliness or social isolation.

The number of people who are supported by the service has significantly reduced during the pandemic. Whilst services moved to a virtual delivery during the pandemic this has been predominately by telephone with very limited progress around virtual groups. A review of three open access voluntary organisations that support people with similar needs has shown some excellent virtual activities and ongoing support that could be developed.

NDLS staff have attended training and the opportunity to trial new ways of working, but wish to reopen the centres and operate as before.

Based on the analysis undertaken, maintaining the previous model of support will not meet DCC's strategic aim of promoting independence and the service will continue to support people who do not have a Care Act eligible need.

## Appendix 3

### Engagement responses

A total of 147 responses were received with 43 of those responses via the Devon County Council Have Your Say webpage. The feedback was reviewed, considered and themes gathered to inform the revised proposal for consultation.

Service users told us that the overwhelming reason for attending the North Devon Link Service was to receive support and guidance around mental health and as a place to meet people and combat loneliness – for many it was both reasons. Most people attended the drop-in part of the service, closely followed by classes and groups. Some people attended both. Three quarters of responses told us that they received virtual support by phone during the pandemic. It is acknowledged that most people said they would like to see the buildings stay open but some responses included seeing more services in the community.

Around 45 responses were received from stakeholders with 30 of those from Ilfracombe. The majority of stakeholders told us that they refer to/use or recommend the North Devon Link Service for support and guidance around mental health and as a place to meet people and combat loneliness. They mainly referred to/used or made people aware of drop-in, Community Support and classes and groups fairly equally. Whilst the main response was to keep the NDLS buildings stay open with a continued drop-in, they have also suggested services that they would like to see in the community such as services for younger people, outdoor activities, holistic treatments and support and more mental health support group to help people gain self-esteem and confidence.

This document represents the view of NDLS users gathered through the reviews, engagement and consultation. We have not gained views from people for whom this service isn't suitable and who would require an alternative service.

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## Appendix 4

### Staff Consultation

19 out of the 20 staff took part in the staff consultation meetings and feedback was received from 14 staff.

Staff voiced concerns about how the changes would affect service users and strongly felt the Link Centre service was essential. There was also a strong feeling of accountability to the community of North Devon and the mental health needs of people who have been supported by the service.

Concerns were raised about travel with not all staff having access to vehicles, and staff on part-time contracts concerned they would spend more time driving than providing a service.

Some concerns were raised around working within the community and lone working.

Some constructive feedback was received from the staff in terms of potential alternative models, and these are included in the options table.

## Appendix 5 Public Frequently Asked Questions

### **North Devon Link Service Stakeholder and Service User Consultation Frequently Asked Questions UPDATED: 27/10/21 (consultation closing date)**

Below are frequently asked questions and statements received during the consultation, which ran from 23 September until Friday 22 October 2021.

- 1. It is wrong to try and replace specialist and highly trained staff with volunteers and community groups. There is no capacity left in voluntary sector and volunteers are burnt out. Voluntary support should not be a replacement for professional support. MH is complicated and getting it wrong can make things worse.**

This proposal is not suggesting extra support is required from unpaid volunteers. The **community and voluntary sector (sometimes known as the third sector)** is huge and incredibly diverse and covers everything from neighbourhood watch groups to social enterprises to national and international charities and everything in between. There is a Manager for each North Devon Link Service and the rest of the team are Support Workers. Many Community and Voluntary Sector organisations employ specialist and skilled staff of this level and this kind of support could be enhanced by commissioning additional support from this sector.

Many of the people who use North Devon Link Services also access to DPT services for specialist support.

- 2. Will services continue to be delivered virtually?**

The intention with this proposal is to provide face to face support but more locally. Services would only be provided virtually where there is a particular request. However, we have learnt through Covid-19, some people have been able to access services virtually who wouldn't be able to if they had to attend physically. For example, people who are unwilling or unable to leave their house. Many services want to continue to deliver some aspects of virtual support alongside face to face.

- 3. Could there be a more creative use of the spaces available or use other buildings in the town for the delivery of a service to be a real community asset, meeting needs such as digital exclusion by providing workspaces, a resource space etc?**

Proposals such as these will be considered as part of the final decision together with ideas about how any such facilities might be run.

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**4. Are people collected from home and taken/bused to the centres?**

In most situations this isn't the case. The purpose of outreach for many people is to encourage attendance at the centre. People in receipt of outreach may be collected and walked to the centre but the numbers were very low.

**5. Are Social Prescribers allowed to refer to the North Devon Link Service?**

Social Prescribers have always been able to refer to the North Devon Link Service. However, since November 2020, nobody has been able to refer to the service due to the change of service delivery because of Covid-19.

**6. Mental Health Professionals should be designing this service.**

This consultation is run jointly with Devon Partnership NHS Trust who are the mental health trust for Devon. We are working together to review the consultation responses to inform any redesign.

**7. Why has there been no face-to-face meetings as part of this consultation?**

It is recognised that service user and stakeholder face to face meetings would be most appropriate for this consultation process. However, Public Health Devon and Devon County Council Corporate and Legal Services have advised that with cases of Covid-19 expected to remain high and with Devon being classified as an Enhance Response Area, face-to-face public meetings should not take place. We have taken reasonable measures to make the consultation as accessible as possible:

A copy of the consultation document was sent to all North Devon Link Service users with a stamped addressed envelope to provide the opportunity for written feedback either by post or e-mail.

The consultation document and accompanying questionnaire was published on the Devon County Council Have Your Say webpage with the opportunity to provide feedback.

Three virtual events being hosted by Teams Live Events.

**8. Will classes and groups like those accessed through the Link Centres still be available?**

We have heard feedback from the engagement process about how important the groups and classes are to the people who use the centres. It is the aim of this proposal to have those groups and classes running more widely than just the four towns where the centres are based.

Devon Recovery Learning Community provide a wide range of free, open access opportunities to learn about mental health and Recovery – many are still running virtually at present. [Devon Recovery Learning Community - supporting you to learn to live well - Devon Recovery Learning Community \(devonrlc.co.uk\)](https://www.devonrlc.co.uk)

- 9. The proposal is vague a present. How will people be able to access the new service and the service that will be provided by the community and voluntary sector?**

We appreciate that you would like more information, but we haven't done any of the detail work yet because we don't know if this proposal will go ahead – it will depend on the outcome of the consultation and it is important not to pre-empt that.

- 10. Is this the right time to be closing mental health services when we hear on the news all the time about the impact of Covid-19 on people's mental health?**

It is important to note that we are not closing a service, rather we are proposing that it is delivered differently. We know that public transport is poor in North Devon and some people do not have transport or other means to get to the current centres. We want to ensure that the service is delivered more flexibly and widely across Northern Devon so more people can access support.

- 11. It is important that people with poor mental health have a safe space to go to where they don't feel judged. The drop in provides this.**

We will consider all the feedback that is received, and we have received feedback that people value the drop-in element. Depending on the outcome of the consultation, we would look at what services are offered in each town and how they can best be delivered, and other ways to provide a drop in could be investigated.

- 12. Are Devon County Council making this change because they want to sell the buildings and get more money?**

That consideration hasn't been discussed as part of this proposal as it is about service redesign, not making cuts or saving money.

- 13. How much do the buildings cost to run?**

We are confirming that information and will share it as soon as we can. This year and last year were not typical years because of Covid-19.

- 14. Where will people go in crisis if this service closes?**

This service should not be used as a crisis service, it has never been for people in crisis and the staff are not trained or qualified to provide that support. DPTs crisis services are for those incidences, through their 24/7 urgent mental health helpline 0808 196 8708.

- 15. It appears that in the new format, people will need to be assessed as having a need. This takes time and often people with MH issues do not**

# Agenda Item 9

**have time to hang around and wait. Can you clarify this? How will this work?**

It's really important to ensure that existing service users have continuity of care and support. Each person will have an assessment by their local service, so we can understand their current needs to ensure it is meeting their need, and signpost if necessary or assess under the care act to establish ongoing support. It will be done in a timely way and staff will be trained to undertake these assessments. People will be able to access support services while waiting for an assessment.

**16. Cases and issues of MH conditions have been increasing. I do not believe that people have been able to access MH services easily. I am concerned that things are going to get more difficult, also with the assessments.**

Access to services hasn't changed. The first response service is open for self-referrals or you can ask your GP to refer you in. This won't change with the consultation.

**17. How will the £3.65M be spent?**

That money is part of the investment for the Community Mental Health Framework and is not part of this consultation. However, for those interested, more detail can be found here: <https://www.dpt.nhs.uk/resources/community-mental-health-framework/what-is-the-community-mental-health-framework>

**18. Could you define what 'Support' means?**

By support we mean helping people – this could include everything from professional assessment to helping prevent loneliness and isolation.

**19. Who will be doing the assessments? How soon do these take place?**

Part of the proposal is for the link centre staff to conduct these assessments. Existing service users will have assessments with staff they already know. We aim for them to be completed in the standard 28 days assessment time.

**20. Have we sought the views of practice managers?**

We have been linking with the practice managers through the Northern Integrated Delivery Group (IDG), and we have also contacted all North Devon GP surgeries with details of the consultation process.

**21. The waits to access mental health services in North Devon are long, 2 years or more. The Link Service is all that is available whilst waiting to be seen. What will happen if the Link Service closes?**

The proposal is to redesign the service rather than close them - and people will not be left without a service.



- 22. What will be available for people who are classed as too risky for mainstream community services? All that is currently available to them is the North Devon Link Service.**

We will ensure that nobody is left without a service. The purpose of the assessment and review process is to ensure that everyone gets the right support for their needs. There will be a wide range of services available that will meet a wide range of needs.

- 23. The current Link Centre service should be extended and run more often.**

Our proposal would mean that a wider range of options would be available to provide support to more people, and that could mean offering services at different times and / or longer hours than some of the current centres. This consultation is about listening to feedback on our proposal as well as any alternative suggestions, and we will consider requests like this as part of that process.

- 24. What are the cost comparisons for the Link Centre as it remains and how much the alternative will cost if it provides the same level of support?**

We cannot make this comparison at the moment. We know how much it costs to run the Link Service when operating fully, and we know how that figure is made. Because we don't know if this proposal will go ahead, we haven't approached community and voluntary sector groups for any costings.

- 25. Are you able to provide a rough estimate of what it would cost to expand services from the Link Centre so as to offer more to a greater number of people (including outreach) as compared to what it will cost to provide a similar level of service to the same number of people using the voluntary sector and community groups?**

We have received ideas through the consultation about how services from the Link Centre could be expanded to offer more to a greater number of people and will work with people with lived experience to develop any changes to the service. This has not been costed during this proposal stage.

- 26. Please provide details of the voluntary sector organisations that you will be commissioning.**

We haven't started this work yet as we are still in proposal stage.

- 27. What evidence is there that mental health services are met by community and voluntary sector organisations?**

Services are delivered differently all over the county. If the proposal were to go ahead, we would like to work with staff, service users and local people to design what would work well for North Devon. We are not proposing that specific and specialist mental health support is met by the voluntary and community sector, but that they can provide some of the other services such as help with form-filling, access to IT, and services to help prevent loneliness and social isolation.

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**28. How is performance of mental health services measured?**

It is standard practice that services that are delivered directly or commissioned to be delivered by other organisations are managed and monitored through a variety of performance reporting mechanisms including performance against an agreed set of measures and looking at how the service benchmarks against other comparable services and national outcomes frameworks.

**29. Is there a further consultation process once you have designed a different service?**

There would not be a formal consultation. If the proposal were to go ahead, we would like to work with staff, service users and local people to design what would work well for North Devon.

**30. What will happen to the buildings if you decide to pursue the closure of a buildings-based service?**

This consultation is about the service redesign and not the physical buildings. If the buildings were to close, then any decision as to their future use would fall to Devon County Council which owns them. Those conversations have not taken place as it would not be appropriate to pre-empt the outcome of the consultation.

# Impact Assessment



Assessment of: Review of North Devon Link Service – Part of the mental health services in Northern Devon

Service: North Devon Link Service

Head of Service: Solveig Wright / Tim Golby

Date of sign off by Head of Service: 1 November 2021

Assessment carried out by: Sarah Dent – Commissioning Development Officer

## 1. Description of service

The four Link Centres in North Devon located in Barnstaple, Bideford, Holsworthy and Ilfracombe are for people experiencing a wide range of mental health difficulties. The Link centres provide a safe space for drop-in sessions where people can socialise and make friends. They run a variety of wellbeing and therapeutic groups, offer time limited community outreach and can offer one to one support during centre opening times. The service supports people with mental health difficulties, signposts to other services where necessary or works to find practical ways of resolving particular problems, including housing, debt and benefit difficulties. The service primarily involves drop-in sessions where people can socialise and make friends and get support from staff to talk over any concerns or difficulties. Wellbeing and therapeutic groups and time limited community outreach for

people struggling to leave their home is also provided as capacity allows.

There is no charge for the service and people can refer themselves or ask a health or social care professional to refer them. This service is only delivered in North Devon and does not exist in this form as a dedicated stand-alone service in any other part of Devon.

At the start of the Covid-19 pandemic, the buildings were temporary closed in line with government guidance and the service moved from a buildings-based support provision to a virtual support service, mostly by telephone. Referrals for the service were temporarily ceased on 23<sup>rd</sup> November 2020. Since December 2020, alongside the virtual support to existing service users, North Devon Link Service staff have worked with the North Devon Mental Health Social Work Team (Devon Partnership NHS Trust) providing a short-term supporting independence approach in addition to the virtual support provision.

As of November 2021, the four buildings remain closed. All four services are based in buildings owned by Devon County Council. The service staff are employed by Devon County Council but managed by Devon Partnership NHS Trust (DPT).

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#### 1 Service Specific Information

##### Barnstaple

- Opening times Monday, Tuesday, Wednesday, Thursday, Friday – 31.5 hours a week. Weekend peer support by appointment only.
- Number of service users on 20 October 2021 – 78
- Number of service users who also use other DPT services – 37 (47%)

In November 2020 it was identified that excessive building work was required on the North Devon Link Service based in Alexander Road in Barnstaple. It was agreed that the service would move to Rosebank, also in Barnstaple. Consultation was undertaken with staff and service users.

##### Bideford

- Opening times Monday, Tuesday, Thursday, Friday – 19 hours a week.

- Number of service users on 20 October 2021 – 104
- Number of service users who also use other DPT services – 54 (52%)

#### Ilfracombe

- Opening times Tuesday, Wednesday, Thursday, Friday – 15.5 hours a week
- Number of service users on 20 October 2021 – 82
- Number of service users who also use other DPT services – 27 (32.9%)

#### Holsworthy

- Opening times Tuesday and Thursday – 10 hours a week

In July 2021, the Holsworthy service was temporarily closed and service users, being supported virtually at that point, were transferred to the Bideford team for ongoing support.

## Reason for review

1 An initial review started in June 2018 and a further in-depth review took place between October 2018 and July 2019.

These reviews were undertaken because:

- In 2019, the board that manages the social care element of mental health provision (the then joint Devon County Council and Devon Partnership Trust 'Section 75 Assurance Board'), requested a review of the four Link Centres in North Devon to establish a clear picture of activity that was being undertaken in the service, the outcomes achieved and whether their service users were Care Act 2014 eligible or eligible for mental health services.

The findings of these reviews were:

- Centre staff are committed and passionate about what they do.

- Centres tell us they provide a recovery service to people from across the mental health spectrum.
- The centres have long-term attenders of up to 20 years plus.
- Most people attending are between the ages of 41 and 65. The service does not meet the needs of younger adults.
- There is little consistency across the service.
- At that time 11% of people who accessed the service had an eligible social care need and were in receipt of additional commissioned support.
- At that time 43.25% of people who access the service were in receipt of another DPT service.
- Community Mental Health Teams made nearly half of the referrals.
- No admission or discharge criteria and no outcome focus or key performance indicators were attached to the service.
- Many of the group activities can or could be met in the community.
- This service is open access, free at the point of delivery service is only available in North Devon resulting in inequality across other areas of Devon.

The proposal taken forward from the review was to implement developmental good practice changes to the existing provision of Services, ensuring consistency across the four centres which would continue to offer a buildings-based service. A project group including Link Service staff was established to progress the work. Progress stopped when the service delivery changed because of Covid-19.

- 2.2 Since March 2020, the beginning of the Covid-19 pandemic, the buildings-based service has been closed and support has been provided virtually, mainly by telephone. A further review was therefore prompted by having the buildings closed and the resulting change to service delivery change due to Covid-19.

This further review of the impact of Covid-19 therefore requested feedback on the impact of the buildings-based service being closed from all stakeholders.

- 2.3 Feedback on the impact of the temporary suspension of referrals was requested from referrers to the service by letter on 23rd November 2020 and the 26<sup>th</sup> April 2021.

- Service user feedback received as part of this review was very low so cannot be viewed as representative of all service users, however, of that received, the majority appear to be in the service because they are lonely or socially isolated.

- Some members of DPT were concerned that they would no longer be able to discharge people from their caseload to the service. Other members of the teams reported that they wouldn't use the service.
- 2.4 The 2019 review established that some people had been accessing the drop-in service for in excess of 20 years. Feedback from engagement has shown that this is still the case. Although it is recognised that some people with long term conditions may need input over a long period of time, these do not necessarily need to be met by statutory services.
- 2.5 There is a national focus on improving and developing the way we deliver community mental health services, including national investment and the introduction of the Community Mental Health Framework.
- 2.6 We want to ensure all community mental health services, including those currently offered from the Link Centres, meet the needs of people in their own communities. The health investment in the Community and Voluntary Sector across Devon, Torbay and Plymouth from national funds (£3.65m over the next 3 years) to support community mental health framework implementation, whilst not linked to this consultation, demonstrates the national and local commitment to that aim.

### 3. Aims / objectives, limitations and options going forwards (summary)

- 3.1 There is opportunity to build on the innovative ways that people have been supported during the pandemic by bolstering and reshaping short-term enabling support in communities across Devon and supporting people to live as independently as possible.
- 3.2 The following proposal was developed for the redesign of the North Devon Link Service and engagement on this proposal ran between 16<sup>th</sup> August 2021 and 15<sup>th</sup> September 2021.
- Redesign the North Devon Link Centre Service from a building-based model to short-term enabling support for those with a statutory need, working with people in their community to achieve what matters to them.
  - Invest in the local community and voluntary sector to support people who do not need this level of support.

3.3 Feedback from service users and stakeholders during the engagement activity was analysed and the proposal for consultation was changed to:

- Redesign the North Devon Link Service to become a community offer that continues to meet the needs of people with varying levels of support, in a wider variety of accessible community setting across Northern Devon. We will continue to run the current service whilst those other services are set up, to ensure no one is left without the support they currently receive.
- The redesigned service will, in the first instance, be for new people accessing the service who have an assessed eligible need under the Care Act 2014.
- Those people who currently access the support provided by North Devon Link Service will be offered an assessment or review to identify how their needs can be met by an alternative service, whilst continuing to receive virtual support.
- This interim period of the two services running in tandem will allow us to identify what development and investment is needed in the Community and Voluntary Sector and develop alternative and future services with people who may be using the services.

3.4 This proposal will develop in line with the Community Mental Health framework which will help local systems address inequalities in mental health care and strengthen relationships with local community groups and the Voluntary and Community sector.

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## 4. People affected and their diversity profile

4.1 People affected and their diversity profile

- People of working age with a Mental Health Need diagnosed and undiagnosed who live in North Devon.
- Staff who work in the services.
- Carers

4.2 Demographics

The demographic information in this section was obtained from the Devon Partnership NHS Trust patient record system, Carenotes, in October 2021.

Team Count



| Team                   | Patients |
|------------------------|----------|
| Link Centre Barnstaple | 78       |
| Link Centre Ilfracombe | 82       |
| Link Centre Bideford   | 105      |
| Total                  | 265      |

## Gender

| Team                   | Female | Male | Total |
|------------------------|--------|------|-------|
| Link Centre Barnstaple | 47     | 31   | 78    |
| Link Centre Ilfracombe | 58     | 24   | 82    |
| Link Centre Bideford   | 56     | 49   | 105   |
| Total                  | 161    | 104  | 265   |

## Age Group

| Team                   | 20s | 30s | 40s | 50s | 60s | 70s | Over 80 | Total |
|------------------------|-----|-----|-----|-----|-----|-----|---------|-------|
| Link Centre Barnstaple | 6   | 10  | 14  | 27  | 16  | 5   |         | 78    |
| Link Centre Ilfracombe | 4   | 9   | 14  | 31  | 17  | 5   | 2       | 82    |
| Link Centre Bideford   | 2   | 13  | 18  | 39  | 25  | 8   |         | 105   |
| Total                  | 12  | 32  | 46  | 97  | 58  | 18  | 2       | 265   |

## Ethnicity

| Team                   | Black or Black British - African | Mixed - White & Black African | White - British | White - English | White - Other/Unspecified | White - Polish | Not Known | Total |
|------------------------|----------------------------------|-------------------------------|-----------------|-----------------|---------------------------|----------------|-----------|-------|
| Link Centre Barnstaple | 1                                | 1                             | 7               | 64              | 5                         |                |           | 78    |
| Link Centre Ilfracombe |                                  |                               | 11              | 67              | 2                         | 1              | 1         | 82    |
| Link Centre Bideford   |                                  |                               | 7               | 92              | 6                         |                |           | 105   |
| Total                  | 1                                | 1                             | 25              | 223             | 13                        | 1              | 1         | 265   |

## Sexuality

| Team                   | Bisexual | Client Unsure | Heterosexual | Null | Prefer not to answer | Total |
|------------------------|----------|---------------|--------------|------|----------------------|-------|
| Link Centre Barnstaple | 1        | 1             | 14           | 62   |                      | 78    |
| Link Centre Ilfracombe |          |               | 15           | 65   | 2                    | 82    |
| Link Centre Bideford   |          |               | 13           | 92   |                      | 105   |
| Total                  | 1        | 1             | 42           | 219  | 2                    | 265   |

Demographic information about disability has not been collected.

When the Holsworthy Service closed due to lack of staffing, clients were transferred to the Bideford Service. Therefore, there is no Holsworthy specific information in this section.

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## 5. Stakeholders, their interest and potential impacts

- 5.1 Community Mental Health Teams – North Devon Link Service is sometimes used as a destination to discharge people from the Community Mental Health Teams or to monitor people whilst they are on the waiting list. This facility will still be available.
- 5.2 North Devon Social Work Teams will have support from part of the North Devon Link Service staff team by the delivery of short term enabling support. The level of support will increase as alternative services develop.
- 5.2 Community and Voluntary sector organisations – some of the services provided by the North Devon Link Service are also offered by the Voluntary and Community Sector and they will be involved in scoping and developing services.
- 5.3 GPs make referrals to the services, but they are very low. GPs will still be able to refer to the service.
- 5.4 Carers and families. The Link Service provides a break for carers and families. Because of the reduction to the amount of drop-ins, the facility may not be so regularly available.

## 6. Research used to inform this assessment

- Mental Health needs Assessment 2013
- Link Centre Performance Dashboard
- DCC charging policy
- Care Notes
- 5 ways to wellbeing
- Reaching for Independence guidance and reviews
- Government Covid-19 Guidance
- Community Mental Health Framework guidance and proposals

## 7. Description of consultation process and outcomes

### Initial Engagement

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- 7.1 For the review which concluded in July 2019, engagement with Staff and service users in Ilfracombe, Barnstaple and Holsworthy was face to face. A questionnaire was sent out to professionals working within DPT and Link Centre Service users.
- 7.2 For the Impact of Covid-19 review, feedback on the impact of the buildings-based service being closed has been gathered via engagement from:
- People who use the NDLS service by way of a survey in October 2020.
  - Through conversations with teams external to NDLS such as the North Devon Mental Health Social Work Team (DPT) and Community Mental Health Teams (CMHT) in the summer of 2020 and again in April 2021.
  - NDLS Service and Deputy Managers, Centre Managers, and support staff in the summer of 2020 and again in April 2021.
- 7.3 Feedback on the impact of the temporary suspension of referrals was requested from referrers to the service by letter on 23<sup>rd</sup> November 2020 and the 26<sup>th</sup> April 2021.

## Further Engagement

7.4 A subsequent engagement process started on 9<sup>th</sup> August 2021 and ran until 13<sup>th</sup> September 2021 on the following proposal.

- Redesign the North Devon Link Centre Service from a building-based model to short-term enabling support for those with a statutory need, working with people in their community to achieve what matters to them and to live as independently as possible; and
- Invest in the local community and voluntary sector to support people who do not need this level of support.

7.5 An engagement questionnaire was developed for Service Users and published on the Devon County Council "Have Your Say" webpage. In recognition that some people who use the North Devon Link Service might not have access to digital resources, a copy of the questionnaire with a pre-paid envelope was posted out to 278 people on the caseload on 12<sup>th</sup> September 2021. 124 postal responses were received.

7.6 An engagement questionnaire was developed for stakeholders and published on the Devon County Council "Have your Say" webpage. An e-mail was sent advising of this to all GP Practices in North Devon, Community Groups in Holsworthy who referred into the service, the North Devon Community Mental Health Teams and the North Devon Mental Health Social Work Team.

### Summary of Responses

- 43 responses were received from stakeholders via the Devon County Council webpage.
- 30 of those responses were from Ilfracombe.
- The overwhelming reason for attending the North Devon Link Service was to receive support and guidance around mental health and as a place to meet people and combat loneliness – for many it was both reasons.
- Most people attended the drop-in part of the service, closely followed by classes and groups. Some people attended both.
- Three quarters of respondents told us that they received virtual support by phone during the pandemic.
- It is acknowledged that most people said they would like to see the buildings stay open, but some responses included seeing more services in the community.
- Most respondents told us that they refer to/use or recommend the North Devon Link Service for support and guidance around mental health and as a place to meet people and combat loneliness.
- Stakeholders referred to/used or made people aware of drop-in, Community Support and classes and groups equally.

- Stakeholders have said that they would like to see the North Devon Link Service buildings stay open but have also suggested services that they would like to see in the community such as services for younger people, outdoor activities, holistic treatments and support and more mental health support group to help people gain self-esteem and confidence.

## Formal Consultation on a Proposal

7.2 Taking due regard of feedback received from the engagement process, the proposal for consultation was changed to:

Redesign the North Devon Link Service to become a community offer that continues to meet the needs of people with varying levels of support, in a wider variety of accessible community settings across Northern Devon. We will continue to run the current service whilst those other services are set up, to ensure no one is left without the support they currently receive.

The consultation ran from 23 September 2021 and until 22 October 2021.

Public Health, Devon County Council Corporate Services and Devon County Council Legal Department, advised that public meetings should not take place due to Devon being classified as an Enhanced Response Area. In light of this alternative arrangements were put in place.

Two webinars took place within the hours that the Link Service would have been open. Following feedback, an additional meeting was arranged to take place of an evening.

The consultation documents with a questionnaire were published on the Devon County Council "Have Your Say" webpage.

The consultation documents and questionnaire were posted to the North Devon Link Service Services Users on 29 September 2021 with a pre-paid envelope.

Centre staff and all referrers to the service and the community mental health teams were also contacted by e-mail and encouraged to support service users to respond.

Councillor James McInnes (Lead Member for Adult Care and Health) and Tim Golby (Locality Director for North and East Devon) emailed and met with DCC councillors representing each of the four towns during the engagement period.

All North Devon GP practices and practice managers were contacted directly, a presentation was given to the Northern Integrated Delivery Group in early August to talk through the proposals with practice managers and other stakeholders there.

Meeting with North Devon Public Stakeholder Network.

Consultation responses were reviewed and logged as received. In the event of cause for concern about the safety of any responders, an escalation process was in place.

7.9 A total of 256 responses were received. 41 by post, 49 by e-mail, 144 via the 'Have Your Say' webpage and 22 by social media. In addition, there were 9 attendees at the webinars.

Responses have been logged and themed, Frequently Asked Questions developed and uploaded to the Have Your Say webpage during the consultation period.

Only 2% of responders agreed with the consultation proposal, 29% suggested alternatives and 69% of responders did not agree with the consultation proposal.

A consistent message was that a move away from the model delivered by the North Devon Link Service before the Covid-19 Pandemic would have a detrimental impact on the mental wellbeing of attendees. Respondents overwhelmingly advocated for the drop-in service to remain as it reduced loneliness and isolation and was considered a 'safe space' where individuals did not feel judged. Anxiety was expressed that 'general' community groups would not offer the same peer-support individuals received from the mental health focussed link service and that a virtual service, despite evidence of its success across other mental health services in Devon during the pandemic, was not a suitable replacement for face-to-face services/contact.

In consideration of the feedback, the Cabinet recommendation was changed to:

1. Re-open three of the four Link Centre buildings (Barnstaple, Bideford and Ilfracombe) as soon as it is deemed safe to do so under Covid-19 guidelines.
2. Holsworthy centre to remain closed and move the once-weekly morning drop-in session to an alternative venue in the town.
3. A local implementation plan and timeframe for redesign of the service to be developed for each centre, including efficiency and management arrangements. Link Centre staff to increasingly focus on outreach support with the mental health social work teams
4. Work with the Link Centre staff, service users, and local community and voluntary sector representatives to establish:
  - a. the outreach services to be delivered in the wider community to ensure equity of provision across all of North Devon. This may include using other community facilities
  - b. which of the existing non-specialist services can be delivered by local community providers. These will need to be cost-effective and within the available budget.
5. Each local implementation plan to assess the potential for wider community use of the building in partnership with local stakeholders
6. Progress on each of the four local implementation plans is reported to Adult Care and Health Scrutiny Committee at its meeting scheduled for 21 March 2023

## 8. Equality impact analysis

Our assessment of the impact of the review and proposed changes for people with characteristics protected under the Equality Act 2010 is as follows:

| <p>Characteristics</p>                                     | <p>Potential or actual issues for this group.</p> <p>[Please refer to the <a href="#">Diversity Guide</a> and <a href="#">See RED</a>]</p>              | <p>In what way will you:</p> <ul style="list-style-type: none"> <li>eliminate or reduce the potential for direct or indirect discrimination, harassment or disadvantage, where necessary.</li> <li>advance equality (to meet needs/ensure access, encourage participation, make adjustments for disabled people, 'close gaps'), if possible.</li> <li>foster good relations between groups (tackled prejudice and promoted understanding), if relevant?</li> </ul> <p>In what way do you consider any negative consequences to be reasonable and proportionate in order to achieve a legitimate aim?</p> <p>Are you complying with the <a href="#">DCC Equality Policy</a>?</p> |
|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>All residents (include generic equality provisions)</p> | <p>This service is provided for people with varying degrees of mental health needs.</p>                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p>Age</p>                                                 | <p>The service is for adults so can be used by people needing mental health support who are over 18. It has not been widely used by younger people.</p> | <p>The proposal to work with the community, staff and service users to develop alternative services, will consider how to make the service more available and appealing to younger people, will constitute a positive impact.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                               |



| <p>Characteristics</p>                                                                                                                              | <p>Potential or actual issues for this group.</p> <p>[Please refer to the <a href="#">Diversity Guide</a> and <a href="#">See RED</a>]</p> | <p>In what way will you:</p> <ul style="list-style-type: none"> <li>eliminate or reduce the potential for direct or indirect discrimination, harassment or disadvantage, where necessary.</li> <li>advance equality (to meet needs/ensure access, encourage participation, make adjustments for disabled people, 'close gaps'), if possible.</li> <li>foster good relations between groups (tackled prejudice and promoted understanding), if relevant?</li> </ul> <p>In what way do you consider any negative consequences to be reasonable and proportionate in order to achieve a legitimate aim?</p> <p>Are you complying with the <a href="#">DCC Equality Policy</a>?</p>                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Disability (incl. sensory, mobility, mental health, learning disability, neurodiversity, long term ill health) and carers of disabled people</p> | <p>The service is for adults covered by the disability protected characteristic, as they will be affected by mental health issues.</p>     | <p>The proposal to reintroduce drop-in, albeit at a reduced level, will mean that some people with a mental health need will not be able to access the service as regularly as before, so will potentially constitute a negative impact. Potential mitigation of that impact will come from effective access to the wider mental health services across Northern Devon. The Link Service is part of the health and care system supporting mental health needs across Northern Devon. Other services include Community Mental Health Teams, Mental Health Social Work Teams, a mental health ward and crisis services such The Moorings (Crisis Café), a 24-hour support phone line from Mental Health Matters and DPT's First Response Service. The Link Service does not provide urgent or crisis support.</p> |

| <p>Characteristics</p>                                                                                                                                                | <p>Potential or actual issues for this group.</p> <p>[Please refer to the <a href="#">Diversity Guide</a> and <a href="#">See RED</a>]</p>                                                                       | <p>In what way will you:</p> <ul style="list-style-type: none"> <li>eliminate or reduce the potential for direct or indirect discrimination, harassment or disadvantage, where necessary.</li> <li>advance equality (to meet needs/ensure access, encourage participation, make adjustments for disabled people, 'close gaps'), if possible.</li> <li>foster good relations between groups (tackled prejudice and promoted understanding), if relevant?</li> </ul> <p>In what way do you consider any negative consequences to be reasonable and proportionate in order to achieve a legitimate aim?</p> <p>Are you complying with the <a href="#">DCC Equality Policy</a>?</p> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Culture and ethnicity: nationality/national origin, ethnic origin/race, skin colour, religion and belief</p>                                                       | <p>The service is available to people requiring mental health support regardless of culture or ethnicity but does not contain any specialist activity based on that characteristic.</p>                          | <p>The proposal has a neutral impact on people with this protected characteristic.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <p>Sex, gender and gender identity (including men, women, non-binary and transgender people), and pregnancy and maternity (including women's right to breastfeed)</p> | <p>This service is available to people requiring support for their mental health needs regardless of sex, gender, or gender identity. However, there is no specialist activity based on that characteristic.</p> | <p>The proposal has a neutral impact on people with this protected characteristic</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

| Characteristics                                                                                                                                                                                                                | Potential or actual issues for this group.<br><br>[Please refer to the <a href="#">Diversity Guide</a> and <a href="#">See RED</a> ]                                                                                                     | <p>In what way will you:</p> <ul style="list-style-type: none"> <li>eliminate or reduce the potential for direct or indirect discrimination, harassment or disadvantage, where necessary.</li> <li>advance equality (to meet needs/ensure access, encourage participation, make adjustments for disabled people, 'close gaps'), if possible.</li> <li>foster good relations between groups (tackled prejudice and promoted understanding), if relevant?</li> </ul> <p>In what way do you consider any negative consequences to be reasonable and proportionate in order to achieve a legitimate aim?</p> <p>Are you complying with the <a href="#">DCC Equality Policy</a>?</p> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sexual orientation and marriage/civil partnership                                                                                                                                                                              | The North Devon Link Service is available to people requiring mental health support regardless of their sexual orientation and marriage/civil partnership but does not include any specialist activity based on the that characteristic. | The proposal has a neutral impact on people with this protected characteristic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Other relevant socio-economic factors such as family size/single people/lone parents, income/deprivation, housing, education and skills, literacy, sub-cultures, 'digital exclusion', access to transport options, rural/urban | Although the service is for people affected by mental health issues, many service users are also subject to deprivation, literacy, digital exclusion and transport and access due to the rurality of Northern Devon.                     | The proposal to reintroduce drop-ins and work with communities, staff and services users to develop services in the voluntary and community sector outside of the 4 towns will constitute a potential positive impact in terms of addressing digital exclusion and access to support.                                                                                                                                                                                                                                                                                                                                                                                           |

## 9. Human rights considerations:

The provision of mental support services is a way of ensuring the human rights of citizens are upheld.

## 10. Supporting independence, wellbeing and resilience. Give consideration to the groups listed above and how they may have different needs:

The purpose of our mental health services is to support all people in receipt of our services to work towards recovery and independence, which will in turn enable them to feel empowered and resourceful.

In what way can you help people to be safe, protected from harm, and with good health and wellbeing?

The purpose of our mental health services is to ensure that people are in receipt of the most appropriate, least restrictive service to keep them safe.

In what way can you help people to be connected, and involved in community activities?

The purpose of our mental health services is to encourage people to make the most use of their skills and resources (strength based approach) including involvement in community activities.

## 11. Environmental analysis

|                                                     |     |
|-----------------------------------------------------|-----|
| Devon County Council's Environmental Review Process | N/A |
| Planning Permission                                 | N/A |
| Environmental Impact Assessment                     | N/A |
| Strategic Environmental Assessment                  | N/A |

|                                                                                                                                                       | Describe any actual or potential negative consequences.<br>(Consider how to mitigate against these). | Describe any actual or potential neutral or positive outcomes.<br>(Consider how to improve as far as possible). |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Reduce, reuse, recycle and compost:                                                                                                                   | N/A                                                                                                  | N/A                                                                                                             |
| Conserve and enhance wildlife:                                                                                                                        | N/A                                                                                                  | N/A                                                                                                             |
| Safeguard the distinctive characteristics, features and special qualities of Devon's landscape:                                                       | N/A                                                                                                  | N/A                                                                                                             |
| Conserve and enhance Devon's cultural and historic heritage:                                                                                          | N/A                                                                                                  | N/A                                                                                                             |
| Minimise greenhouse gas emissions:                                                                                                                    | N/A                                                                                                  | N/A                                                                                                             |
| Minimise pollution (including air, land, water, light and noise):                                                                                     | N/A                                                                                                  | N/A                                                                                                             |
| Contribute to reducing water consumption:                                                                                                             | N/A                                                                                                  | N/A                                                                                                             |
| Ensure resilience to the future effects of climate change (warmer, wetter winters; drier, hotter summers; more intense storms; and rising sea level): | N/A                                                                                                  | N/A                                                                                                             |
| Other (please state below):                                                                                                                           | N/A                                                                                                  | N/A                                                                                                             |

## 12. Economic analysis

|                                 | Describe any actual or potential negative consequences.<br>(Consider how to mitigate against these). | Describe any actual or potential neutral or positive outcomes.<br>(Consider how to improve as far as possible). |
|---------------------------------|------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Impact on knowledge and skills: | Neutral impact                                                                                       | Neutral impact                                                                                                  |
| Impact on employment levels:    | Neutral impact                                                                                       | Neutral impact                                                                                                  |
| Impact on local business:       | Neutral impact                                                                                       | Neutral impact                                                                                                  |

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## 13. Describe and linkages or conflicts between social, environmental and economic impacts (Combined Impacts):

There is some correlation, identified above, between people who use the service and economic deprivation which the move to more community based services will potentially help address.

How will the economic, social, and environmental well-being of the relevant area be improved through what is being proposed? And how, in conducting the process of procurement, might that improvement be secured?

Making the proposed community-based services more accessible will potentially improve the social wellbeing of the area.

## 14. How will impacts and actions be monitored?

If the proposal is taken forward a project group will be set up to implement and monitor.

## **Treasury Management – Mid Year Stewardship Report 2021-22**

Report of the Director of Finance (Designate)

Please note that the following recommendations are subject to consideration and determination by the Committee before taking effect.

Recommendation: That the Committee consider whether it wishes to draw to the attention of the Cabinet any observations on the Treasury Management Mid Year Stewardship Report.

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1. Introduction

- 1.1 The County Council has adopted the CIPFA (Chartered Institute of Public Finance and Accountancy) Code of Practice for Treasury Management in the Public Services. A revised Code of Practice was published by CIPFA in December 2017 and a revised Policy Statement and Treasury Management Practices (TMPs) were agreed by Council in February 2018. The Treasury Management and Investment Strategy for 2021/22 was agreed by Council in February 2021 and forms part of the published budget book.
- 1.2 The purpose of this report is to inform members of any key matters arising from the Council's Treasury and Debt Management activities during the first seven months of the 2021/22 financial year. It is intended to enable members to ensure that agreed policy is being implemented. This report, together with any comments offered by this committee, will be considered by Cabinet on 8th December.

2. Borrowing Strategy 2021-22 to 2023-24

- 2.1 The overall aims of the Council's borrowing strategy are to achieve:
 - Borrowing at the lowest rates possible in the most appropriate periods;
 - The minimum borrowing costs and expenses;
 - A reduction in the average interest rate of the debt portfolio.
- 2.2 The Medium Term Financial Strategy assumes that, over the three year period, no new long-term borrowing will be required, although this will be kept under review. The majority of the capital programme is funded by capital grants or use of capital receipts. Some use is made of internal borrowing from the Council's cash resources, and prudent management of the capital programme aims to ensure that there is no requirement to take on additional

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external borrowing. If short-term borrowing is required to aid cashflow, this will be targeted at an average rate of 0.1%.

- 2.3 Active treasury management and the maintenance of levels of liquidity have ensured that no short term borrowing has been required for the financial year to date. Cash positions are monitored daily and modelled over a monthly horizon to ensure that anticipated liquidity levels are forecast accurately.
- 2.4 In accordance with the Medium Term Financial Strategy no long term external borrowing has been undertaken this financial year. Instead, all borrowing required to fund capital expenditure has been funded by internal cash balances.
- 2.5 At 31st October 2021 the level of long term debt remains unchanged at £507.85m as detailed in the table below.

Analysis of Long Term Debt

	Actual 31.03.21 £'m	Interest Rate %	Actual 31.10.21 £'m	Interest Rate %
Fixed Rate Debt				
PWLB	436.35	4.99	436.35	4.99
Money Market	71.50	5.83	71.50	5.83
Variable Debt				
PWLB	0.00		0.00	
Money Market	0.00		0.00	
Total External Borrowing	507.85	5.11	507.85	5.11

- 2.6 Every year the Council budgets for a Minimum Revenue Provision to set aside cash to then repay this external debt. At the same time, we are then borrowing that cash back, by way of internal borrowing from the Council's cash balances to finance the capital programme. The ability to internally borrow from the Council's cash has enabled the Council to fund its capital programme in recent years without taking out further external debt and incurring additional interest costs and other capital financing costs.
- 2.7 While cash balances remain relatively high, we can continue to internally borrow to meet our capital commitments and maintain a measured level of future capital investment. However, this may become more challenging if there continues to be growing pressure on both the Council's capital programme and revenue budget, and other calls on cash balances such as the deficit on Special Educational Needs.
- 2.8 No opportunities have arisen during this financial year to repay external debt without incurring substantial premium penalties, which would negate any benefit of repaying the debt. The PWLB sets premature repayment rates and, where the interest rate payable on a current loan is higher than the repayment rate, the PWLB policy imposes premium penalties for early repayment. With current low rates of interest these penalties would be of a significant cost. Therefore, it will only make financial sense to repay debt early if the PWLB changes its current policy, or if interest rates rise

significantly and cancel out the repayment premiums. This is unlikely to happen in the short to medium term.

- 2.9 The earliest date on which any of the Council's external debt matures is 31 March 2027, when the Council is due to repay a PWLB loan of £33.8 million, with a further £5.8 million to be repaid later in 2027. While this may still seem a long time away, officers have begun to consider plans for the repayment of these loans. Given that the Council's capital programme is "over borrowed" from its internal cash, there will need to be careful management of future capital requirements to ensure that cash resources are available so that these loans can be repaid, otherwise there might be a future need to take out new external borrowing to re-finance the debt.

3. Investment Strategy 2021-22

- 3.1 The County Council continues to adopt a very prudent approach to counterparties to whom the County Council is willing to lend. As a result, only a small number of selected UK banks and building societies, money market funds and Non-Eurozone overseas banks in highly rated countries are being used, subject to strict criteria and the prudent management of deposits with them. In addition, the CCLA (Churches, Charities and Local Authorities) Property Fund is being used. The lending policy is kept under constant review with reference to strict criteria for inclusion in the counterparty list.
- 3.2 The 2021/22 Treasury Management Strategy also included provision for the use of multi-asset income funds or short dated bond funds. Use of such funds would be subject to the approval of the Cabinet Member for Resources Management.
- 3.3 The overall aim of the Council's investment strategy is to:
- Limit the risk to the loss of capital;
 - Ensure that funds are always available to meet cash flow requirements;
 - Maximise investment returns, consistent with the first two aims;
 - Review new investment instruments as they come to the Local Authority market, and to assess whether they could be a useful part of our investment process.
- 3.4 The target rate for interest on deposits with banks, building societies and money market funds is 0.3%. The target rate for the CCLA Property Fund is 3.8%.
- 3.5 The following table shows the County Council's fixed and variable rate investments as at the start of the financial year and as at 31st October 2021:

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Schedule of Investments

		Actual 31.03.21 £'m	Interest Rate %	Actual 31.10.21 £'m	Interest Rate %
Bank, Building Society & MMF Deposits					
Fixed Rates					
Term Deposits	< 365 days	80.00	0.86	157.50	0.17
	365 days & >	18.00	1.13	26.00	0.90
Variable Rate					
Call Accounts		20.46	0.03	28.62	0.03
Notice Accounts		70.00	0.16	50.00	0.19
Money Market Funds (MMF's)		0.00	0.00	0.00	0.00
Property Fund		10.00	4.21	10.00	4.14
All Investments		198.46	0.72	272.12	0.37

- 3.6 Following the outbreak of the Covid pandemic the Bank of England reduced its base rate firstly to 0.25% and then to 0.1% during March 2020. As a result, the target for investment income from banks, building societies and local authorities was reduced to 0.3% for 2021/22. The average rate achieved for the year to date (not including the CCLA Property Fund) is 0.28%. The return achieved for the £10 million investment in the CCLA Property Fund remains at just over 4%.
- 3.7 The total level of cash remains high. Generally, cash does increase during the early part of the year as grants are received in advance of spend, with a gradual reduction during the Autumn and Winter. It is anticipated that the cash balance at the 31st March 2022 will be lower than the balance at the beginning of the financial year, but that will depend on the level of slippage on the capital programme and the level of carry-forwards at year end.
- 3.8 Revenue lending up to 31st October, including the use of term deposits, call accounts, money market funds and the CCLA property fund, has earned interest of £583,000 against a full year budget of £800,000. It is forecast that the investment income for the full financial year will exceed budget by around £150,000.
- 3.9 This position results from the higher than anticipated levels of cash being invested. The level of carry-forwards and additions to revenue reserves from the 2020/21 outturn position has contributed to the high levels of cash, along with the additional funding provided by Government for Covid related issues. It is anticipated that Covid related expenditure will reduce the levels of cash by year end.
- 4. Minimum Revenue Provision**
- 4.1 Each year the Council has a statutory obligation to charge to the revenue account an annual amount of Minimum Revenue Provision (MRP), which is a charge to make provision for the repayment of the authority's external debt

and internal borrowing. The charge is based on the historic borrowing required to fund the Council's capital programme.

- 4.2 The current policy, following a review in 2018/19 is to charge MRP in equal instalments over the life of the asset benefiting from the capital spend, based on the annuity method. The budgeted MRP for 2021/22 is £12.996 million.

5. Prudential Indicators

- 5.1 Linked to its Treasury Management Strategy, the County Council is required to monitor its overall level of debt in line with the CIPFA Code of Practice. Part of the code requires consideration of a set of Prudential Indicators in order to allow the Council to form a judgement about the affordable, prudent and sustainable level of debt.
- 5.2 The purpose of the indicators is to demonstrate that:
- Capital expenditure plans are affordable;
 - All external borrowing and other long term liabilities are within prudent and sustainable levels;
 - Treasury management decisions are taken in accordance with professional good practice.
- 5.3. Three Prudential Indicators control the overall level of borrowing. They are:
- The Authorised Limit - this represents the limit beyond which any additional borrowing is prohibited until the limit is revised by the County Council. Revision may occur during the year if there are substantial and unforeseen changes in circumstances, for example, a significant delay in achieving forecast capital receipts. In normal circumstances this limit will not require revision until the estimate for 2022/23 is revised as part of the 2022/23 budget process.
 - The Operational Boundary – this indicator is based on the probable external debt and other long term liabilities during the year. Variations in cash flow may lead to occasional, short term breaches of the Operational Boundary that are acceptable.
 - The Underlying Borrowing Requirement to Gross Debt - the Council also needs to ensure that its gross debt does not, except in the short term, exceed the total of the Capital Financing Requirement.
- 5.4 During the Budget process, the following Borrowing Limits were set for 2021/22:
- Maximum borrowing during the period (Authorised Limit) - £766.193 million.
 - Expected maximum borrowing during the year (Operational Boundary) - £741.193 million.
 - Maximum amount of fixed interest exposure (as a percentage of total) - 100%
 - Maximum amount of variable interest exposure (as a percentage of total) - 30%

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- 5.5 Members are asked to note that for 2021/22 to date, the Council has remained within its set Borrowing Limits and has complied with the interest rate exposure limits.

6. Prospects for 2022/23

- 6.1 There was significant expectation that the Bank of England Monetary Policy Committee would increase interest rates at their meeting on 4th November. While this did not happen, there is still an expectation that rates will increase in the next few months. Emerging supply constraints on economic output, plus an increase in inflation expectations have prompted the change in outlook. Our Treasury Advisors, Link, forecast an increase in the base rate from 0.1% to 0.25% by June next year, with other economists predicting an earlier increase. As a result, we have seen the rates offered by banks and building societies increase over the last few weeks.
- 6.2 This provides the possibility of a small improvement in the return that can be achieved from investing the Council's cash balances. Should bond yields begin to rise there may also be benefit in initiating an investment in short-dated bond funds. However, in setting the target for next year, it would be wise to be prudent. Therefore, the target return for 2022/23 is likely to be similar to the target for 2021/22, with perhaps a small uplift.
- 6.3 There is also likely to be significant pressure on the Council's finances going forward. Significant expenditure has been committed to support the response to the pandemic, while the Council also faces a growing deficit on the provision for Special Educational Needs (SEND). While at the end of October 2021 the cash balances remain high, this has been partly due to the front-loading of Government grants related to the pandemic, and as this continues to be spent, and the SEND deficit grows, it is likely that the cash balances will reduce significantly before the financial year end.
- 6.4 In planning the Treasury Management Strategy for 2022/23, the target rate for lending to banks and building societies is likely to remain close to the 2021/22 target of 0.3%, with perhaps a small increase. This may allow a small increase in the budgeted income for 2022/23 over the current year. These assumptions will be reviewed before the 2021/22 Strategy is presented in January.
- 6.5 During the Autumn, CIPFA has been consulting on a revised Prudential Code and a revised Treasury Management Code. As a result, it will be necessary to review the Council's Treasury Management Practices in line with the new code. This will include the introduction of new prudential indicators which will need to be included within the Treasury Management Strategy. The main aim of the revised codes appears to be to ensure that borrowing is properly controlled and to reduce the amount of borrowing undertaken by local authorities to fund commercial investment to achieve a return rather than to meet service priorities. This should be less of a concern to Devon County Council, as our policy has not been to borrow to fund long term investments.

7. Summary

- 7.1. No long term borrowing has been undertaken to date in 2021/22. The expectation is that no new borrowing will be required during the remainder of the 2021/22 financial Year.
- 7.2 No short term borrowing has been undertaken to date in 2021/22.
- 7.3 The investment income achieved as at the end of October stands at around £580,000 compared to the budget target for the year of £800,000.
- 7.4 Looking ahead, there may be a small increase in the rates available for treasury investments in 2022/23, but rates will remain very low. The Council will need to manage its capital programme carefully to ensure it remains affordable within the policy of not taking out further external debt.

Angie Sinclair
Director of Finance (Designate)

Electoral Divisions: All

Local Government Act 1972:

List of Background Papers: Nil

Contact for Enquiries: **Mark Gayler**

Tel No: **01392 383621** Room: **G97**



16 November 2021

**Torbay and Devon Safeguarding Adults Partnership
Annual Report 2020-21**

Covering Brief for: Cabinet

Meeting Date/Time: Wednesday 08 December 2021

Purpose of agenda item:

It is a statutory requirement, under the Care Act 2014, for each Safeguarding Adults Board (SAB) to produce and publish an Annual Report.

It is also a requirement for each SAB to present their Annual Report to their Health and Wellbeing Board(s).

As in previous years, the TDSAP also presents the Annual Report to Scrutiny Committee and Cabinet.

This Annual Report was presented to the Devon Health and Wellbeing Board on 28 October 2021 and to the Devon Health and Adult Care Scrutiny on 11 November 2021. In Torbay, the report will go before the Torbay Health and Wellbeing Board on 09 December 2021.

More detailed information about the work of the TDSAP is available on the TDSAP website: [Home - Torbay and Devon Safeguarding Adults Partnership](#)

1. Introduction

- 1.1 The full annual report summarises TDSAP safeguarding activity undertaken throughout 2020-21.
- 1.2 As in previous years, we have attempted to ensure that the 2020-21 Annual Report is concise, informative and provides a level of information to enable readers to fully understand the work of the partnership during a very difficult year for all concerned.
- 1.3 The Annual Report will be published on the TDSAP website, alongside full details of Safeguarding Adult Reviews (SARs), which we have published during this and previous years.
- 1.4 Work is currently underway to produce easy read versions of the Annual Report and this is being completed in partnership with our Community Reference Subgroup.

Agenda Item 12

2. Safeguarding Adults Partnership - Background

- 2.1. The TDSAP is the strategic lead body for safeguarding, with an overriding objective to prevent and reduce the risk of significant harm to adults with care and support needs, from abuse or other types of harm or exploitation.
- 2.2 The former Devon Safeguarding Adults Partnership and Torbay Safeguarding Adults Board merged in December 2020, therefore creating a new joint Torbay & Devon Safeguarding Adults Partnership (TDSAP).
- 2.3 The TDSAP is completely independent, with an independent chair, Paul Northcott. Paul was appointed to the role in December 2020.
- 2.4 The TDSAP is the collective name for the partners that work with the Safeguarding Adults Board (SAB) to safeguard adults across Torbay and Devon.
- 2.5 The TDSAP acts as the key mechanism for agreeing how these agencies work together to safeguard and promote the safety and wellbeing of adults at risk and/or in vulnerable situations. It does this by co-ordinating what each of the TDSAP partners does and makes sure that they do it effectively.

3. Legislative Context

- 3.1 The Care Act 2014 requires that local authorities hold the lead responsibilities for safeguarding adults. The TDSAP acts as the strategic mechanism for ensuring that all partners work together successfully.
- 3.2 The Care Act 2014 sets out that there are 3 key statutory requirements for the Partnership:
 - 3.2.1 To deliver and publish an Annual Report
 - 3.2.2 To ensure that the Partnership appropriately conducts Safeguarding Adult Reviews (SARs)
 - 3.2.3 To develop and publish a Strategic Business Plan

4. Summary and Moving Forward

- 4.1 The period covered by the report ends on 31 March 2021. Covid-19 has had an impact on the work of the partnership, it has brought many challenges, though despite these additional pressures, all partners have continued to work effectively together and responded well when being held to account by the TDSAP. Partners have shown continuous commitment to our key strategic areas and provided a good level of assurance throughout the year.
- 4.2 As mentioned in 3.2.3, the TDSAP is required to produce a Strategic Business Plan.
- 4.3 The plan for 2021–2024 has been developed and published on our website. Here is a link: [Strategic Business Plan 2021-2024 - Torbay and Devon Safeguarding Adults Partnership](#)

**Torbay & Devon Safeguarding Adults Partnership
(TDSAP)**

2020-21 Annual Report



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Section 1: Chair's Foreword



1.1 Paul Northcott – Chair of the Torbay and Devon Safeguarding Adults Partnership (TDSAP)

The merger of both the Torbay and Devon Safeguarding Adults Boards into the TDSAP has presented a unique opportunity to strengthen the partnership and build on the previous successes that have been achieved in both areas. I would like to thank the two previous Chairs and the senior managers for all of their commitment and vision in progressing the merger.

Joint working opportunities have enabled us to progress the work that has been detailed in this report whilst also enabling us to plan for the challenges that we will encounter in the future.

The new priorities for the partnership will ensure that we focus on those areas that will improve safeguarding practice and ensure that we are effectively working together to deliver services that meet the needs of vulnerable individuals and the wider community. Community and service user engagement continues to be developed and is seen by the partnership as essential in building on the progress that has been achieved and informing future practice.

1.2 Julie Foster – Former Chair of the Torbay Safeguarding Adults Board

Like many other organisations across the world, Torbay Safeguarding Adults Board has had to adjust the way it operates during the current pandemic. Meetings have had to be convened virtually and some of our activities suspended temporarily whilst pressing priorities to safeguard a much wider population were actioned.



The responsiveness and flexibility of our partners has been fantastic and, despite the need to work differently, safeguarding adult's activity has continued relentlessly and those at risk from harm have been protected. Steps have been taken to publish the help available in cases of both domestic and financial abuse - issues which caused a particular concern during lockdown. We have also taken steps to monitor the impact of very busy health and care systems on hospital discharge and care at home to ensure adults at risk do not fall through gaps.

It is to the credit of our senior managers that the plans to develop a new Safeguarding Adults Partnership between Devon and Torbay have reached fruition during the past year. Torbay is keen to maintain its own identity and has its own particular opportunities and threats, but it makes sense to build on our close links with Devon to provide a consistent approach across the area and to reduce the duplication and resource requirements of two separate Boards



1.3 Siân Walker – Former Chair of the Devon Safeguarding Adults Partnership

The pandemic had a massive impact on all of us, especially on vulnerable people living in Devon's communities. Whilst, like others, we had to adjust the way we worked, the Devon Safeguarding Adults Board continued to function well, adapting to more regular updates from statutory partners from the Council, Police, NHS and the voluntary and community sector. This provided information and data which enabled us to take immediate action where appropriate. The Board continued to function with virtual meetings but work behind the scenes changed as Board Support staff were deployed to front line services, importantly to resource services to support effective safeguarding. We maintained a good overview and I felt assured that safeguarding remained a top priority by all partners. I worked alongside other Safeguarding Chairs in the south-west so we could all learn from one another, adapt and be agile to these new circumstances. I ensured that we maintained our ability to respond well to the very many circumstances in which people found themselves, both citizens and professionals across the partnership, as we supported them all in their Covid response. Plans were progressed during this time to merge the Devon & Torbay Safeguarding Adults Boards, something which I fully supported in the knowledge that our partners worked across both Council areas, and it enabled a more dynamic and efficient way of working.

I was delighted, after chairing the Devon Safeguarding Partnership for 5 years, to leave it in a far healthier position. I am grateful for the opportunity I had to work across our county and delighted to hand over to Paul Northcott with the newly merged Partnership Board.

Section 2: Our Role and Purpose

The Torbay & Devon Safeguarding Adults Partnership (TDSAP) is the collective name for the partners that work with the Board to safeguard adults across Torbay and Devon.

The **Torbay & Devon Safeguarding Adults Partnership (TDSAP)** was founded in the final quarter of 2010/21 by Devon County Council and Torbay and South Devon NHS Foundation Trust as a requirement of the Care Act 2014. It provides strategic leadership for adult safeguarding across Torbay & Devon. Prior to the creation of the TDSAP there were two separate Boards operating in Torbay and Devon; the Devon Safeguarding Adults Partnership and the Torbay Safeguarding Adults Board.

The TDSAP is completely independent, with an independent chair.

The core objective of the Partnership, set out in section 43(2) of the Care Act 2014, is to help and protect adults in its area in cases where an adult has care and support needs and;

- They are experiencing, or at risk of, abuse or neglect; and
- As a result of those care and support needs, they are unable to protect themselves from either the risk of or the experience of abuse or neglect

The TDSAP acts as the key mechanism for agreeing how agencies work together to safeguard and promote the safety and wellbeing of adults at risk and/or in vulnerable situations. It does this by co-ordinating what each of the TDSAP members does and makes sure that they do it effectively.

The TDSAP multi-agency partnership, aims to promote awareness and understanding of abuse and neglect among service users, carers, professionals, care providers and the wider community. It works to generate community interest and engagement in safeguarding to make sure that **'safeguarding is everyone's business'**.

The TDSAP also commissions Safeguarding Adults Reviews for people who have experienced poor safeguarding outcomes, to ensure that lessons are learned for the future.

Section 3: Our Structure

The TDSAP established the below structure to undertake the work on behalf of the Partnership. These meetings are supported by the Partnership Business Manager and Partnership Co-Ordinator. Each sub-group has a regularly reviewed Terms of Reference.

When required, Task & Finish groups are established to deliver key elements of work commissioned by and reported to the Partnership. These Task and Finish groups comprise of representatives nominated by Partnership members who have sufficient knowledge and skills to contribute to the required task.



TDSAP Organisational Structure

Section 4: Our Partnership Members

The TDSAP has representatives from the following organisations; Torbay & South Devon NHS Foundation Trust, Northern Devon Healthcare NHS Trust, Royal Devon & Exeter NHS Trust, University Hospitals Plymouth NHS Trust, NHS Devon Clinical Commissioning Group, NHS England/Improvement, Torbay Council, Devon County Council, East Devon District Council, Devon Partnership Trust, Livewell Southwest, South Western Ambulance Service Foundation Trust, Devon & Cornwall Police, HM Prison & Probation Service, Devon & Somerset Fire & Rescue Service, Care Quality Commission, Living Options, Healthwatch, Trading Standards, Housing and The Department of Work and Pensions.

Section 5: Safeguarding Adult Reviews

The Torbay & Devon Safeguarding Adults Partnership (TDSAP) must arrange a Safeguarding Adults Review (SAR) when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is a concern that partner agencies could have worked more effectively to protect the adult.

The TDSAP must also arrange a SAR if an adult in its area has not died, but the SAB knows or suspects that the adult has experienced serious abuse or neglect. Boards may also arrange for a SAR in any other situations involving an adult in its area with needs for care and support.

Consistent SAR themes from 2020/21 referrals include:

- Mental Health
- Suicide
- Self-Neglect
- COVID Lockdown Impact

The SAR Core Group continues to meet quarterly and has done so throughout the COVID pandemic. The Core Group is attended by representatives from partner organisations including CCG, NHS, Local Authorities and the Police.

SAR Activity During 2020/21:

- There have been 24 SAR referrals during the period of 2020-2021.
- 10 SAR referrals were received by Devon Safeguarding Adults Partnership. 3 SAR referrals were received by Torbay Safeguarding Adults Board. 11 SAR referrals were received by the TDSAP.
- There have been 4 SAR Learning Events across Torbay and Devon

In 2020-21 the Devon Safeguarding Adults Partnership published one SAR – ‘SAR Ben’.

Summary of SAR Ben:

Ben was 57 years old when he died. He was reported missing on 3rd November 2018. His body was found off the coast of Devon on 5th November 2018. He had not been seen for several days before this.

Ben had Huntington’s Disease. Huntington’s Disease is a relentlessly progressive neurodegenerative disorder which, for Ben, resulted in complex care needs. The difficulties Ben experienced as a result of the impact on his frontal lobe resulting from his Huntington’s Disease, impacted on his ability to cope with daily life.

Given Ben’s complex needs and associated risks, his care and support needed to be considered in a multi-agency and multi-disciplinary way.

At the time of his death Ben was being supported by several agencies. Ben's family held a view that a different approach to working alongside Ben was needed.

Learning Point: Experience, skills and confidence of staff working with Huntington's Disease

The experience, skills and confidence of staff working with someone who has a complex long-term condition plays a big part in the success of such support. In Ben's case more could have been done to utilise the expertise of both services and family members with relevant experience. Ben was well known to the Huntington's Disease regional advisor who could have been contacted to assist with care planning. However, this did not happen. Staff should have proactively engaged the support of condition-specific specialist services in their assessment and planning of care. There should have been greater focus on Ben's strengths and personal goals.

Learning Point: Mental health commissioning arrangements

The review highlights the disjointed nature of Devon mental health commissioning arrangements for people with a diagnosis of Huntington's Disease. In Devon there are several commissioned services within the community, both for long term conditions and mental health, which may be able to support a person's mental health needs. The suitability of the service would be dependent on a person's presentation, stage and primary need and diagnosis. In Ben's case, services available appeared to be based on diagnosis rather than need. As the Community Mental Health service in Devon is not commissioned to provide a single identified 'neuropsychiatric care' service, Ben did not receive community mental health support. There does not appear to have been consideration of alternative services to provide support. There is an apparent lack of awareness across the health and care system regarding the range of services available for people with a diagnosis of Huntington's Disease, the criteria, the limitations of the services, and how these services can be accessed.

Learning Point: Risk assessment and risk management

The perception that multi-agency risk management can't occur unless under the auspices of undertaking a safeguarding enquiry needs addressing. In Ben's case there was a significant delay in getting a multi-disciplinary team response to risk. There was a difference of opinion across organisations around what are acceptable levels of risk for Ben. There needs to be more regular use of multi-disciplinary risk management meetings with clear outcomes and actions attributed to all agencies. Multi-agency risk assessments must be of a sufficiently high standard and include feedback from key agencies and significant others in the person's life.

Further information on TDSAP SARs, including copies of previously published SARs, please visit our website.

For more information on how to raise a concern please visit our website.

Section 6: TDSAP Sub-Groups

6.1 Community Reference Group

The newly formed Joint TDSAP Community Reference Group (CRG) includes people recruited from local Voluntary, Community and Social Enterprise (VCSE) and people with lived experience of the safeguarding process, across the TDSAP area.

The CRG has grown from strength to strength undertaking co-production, consultation and engagement work. Methods to gather intelligence have included focused task and finish groups, on-line and telephone surveys and varied user led dialogue. The CRG has provided new ways for people who have been through safeguarding processes to input directly into the work of the partnership.

The CRG provides feedback on key priorities for future work, is raising awareness of safeguarding with the adult population and two-way communication channels with representatives within and across the VCSE.

During 2021 the CRG brought the voice of the service user into the Annual Partnership Development Day and ensured that the voice of the people we support, remains central to the planning of future partnership priorities.

6.2 Learning & Improvement Sub-Group

The Learning and Improvement Subgroup has continued to undertake and complete key areas of work, despite meeting less frequently than usual in 2020/21 due to partner agencies responding to health and social priorities related to the COVID 19 pandemic. These areas of work include the Partnership reviewing, retendering and awarding a contract to provide a comprehensive range of safeguarding adults and mental capacity act training. The majority of the training during the year, was delivered virtually due to the COVID 19 pandemic. The safeguarding adults training strategy has remained a key focus following its approval last year. Assurance was sought from partners regarding individual progress in order to develop a partnership wide implementation plan.

6.3 Mental Capacity Act Sub-Group

Over the previous 12 -month period the work of the Mental Capacity Act Subgroup experienced some disruption as a consequence of the Covid19 pandemic response. Although some of the sub group meetings were stood down, to allow partners to concentrate on their COVID 19 pandemic responses, the existing work plan was regularly reviewed and updated once the group was in a position to reconvene.

There is renewed energy amongst our partners for collaborative working wherever possible and a recognition that there continues to be an ongoing need to increase legal literacy across operational staff groups to protect the wellbeing and rights of people we support across Torbay and Devon.

The priority work will continue to be focussed on the following areas:

- Increasing understanding and application of Legal Literacy across partner organisations
- The Liberty Protection Safeguards which are expected to come into force in 2022.
- The use of lawful restrictive measures
- The Mental Capacity Act 2005 learning outcomes from SARs

The group continues to work in tandem with the Learning and Improvement Sub Group and the interaction between these 2 sub-groups is regularly reviewed to ensure this organisational arrangement is fit for purpose to help deliver the strategic priorities of the partnership.

6.4 Operational Delivery Group

The Operational Delivery Group (ODG) oversees all of the above sub-groups and reports directly to the Partnership Board. In 2021/21, following a review of the Safeguarding Insight Data, the ODG established four Task and Finish groups to review the data and suggest areas for improvements. The four groups focused on; Care Homes, Types of Abuse, Blue Light Services and Health Referrals.

The Partnership has been supporting the Local Authorities to help inform a national picture in relation to the COVID 19 pandemic. The results of which are shared back to local authorities and our Partnership to inform future learning opportunities, via an Insights Data Report.

The ODG continues to review and consider developing areas of adults safeguarding to ensure that partners are well informed to respond to emerging themes and trends.

Section 7: TDSAP Priorities 2020/21

Prior to the establishment of the TDSAP in Dec 2020, the Torbay Safeguarding Adults Board and the Devon Safeguarding Adults Partnership had separate strategic priorities held within their own business plans.

Former Torbay Safeguarding Adults Board (TSAB)

The TSAB Business Plan was for the period 2018-2021 and included the below priorities:

1. Embedding Making Safeguarding Personal
2. Learning from Safeguarding Adult Reviews
3. The Interface Between Safeguarding Adults at Risk and Domestic Abuse / Sexual Violence
4. Preventative and Creative Solutions
5. Mental Capacity Act
6. Market Shaping and Commissioning

Former Devon Safeguarding Adults Partnership (DSAP)

The DSAP Business Plan for 2020-2021 included the below priorities:

1. Safeguarding within the Covid-19 Pandemic:
 - To work in partnership to ensure continuity of safeguarding adults business.
2. Living Well:
 - The DSAP Board aims to support partners to deliver preventative actions, to safeguard those with care and support needs through learning together and delivering change.

Copies of both of the above business plans can be found on our partnership website.

Section 8: Our Work During 2020/21

COVID-19 had a significant impact on both Safeguarding Adults Boards and the newly merged Board and the core work that continued during the pandemic. A decision was made, in consultation with partners, to re-prioritise and strategically pause some work, to enable partners to concentrate on their pandemic response as a priority.

Despite adopting a focus on statutory assurance and support, the Boards continued to maintain their Care Act 2014 obligations for safeguarding adults with regular assurance gained from their key safeguarding partners.

Partners provided assurance reports to the Independent Chairs including updates on their COVID 19 crisis response. This approach ensured that partners provided proportionate strategic overview during the pandemic.

In December 2021 the Devon Safeguarding Adults Partnership and the Torbay Safeguarding Adults Board merged to form the TDSAP. This included a successful process to appoint a new Independent Chair to the TDSAP. The merger was completed in Quarter 4 of 2020/21 and since then the TDSAP has been working to ensure their policies and procedures are aligned across the new partnership.

The TDSAP has undertaken a review of Safeguarding and Mental Capacity Act training to ensure the offer from the TDSAP is up to date and in line with legal literacy. The TDSAP increased safeguarding training capacity for partners to meet increased demand following an awareness campaign launched in 2020.

The TDSAP undertook a review of the referral process for SARs as a result of an increased number of SARs being received. An evaluation criteria was introduced to ensure the process is as effective and efficient as possible.

Learning from SARS continues to be a priority piece of work for the TDSAP going into 2021/22 and beyond, as detailed in the Strategic Priorities 2021/2024.

Section 9: Looking Ahead

The Strategic Priorities for the TDSAP have been agreed and published in the 2021-2024 TDSAP Business Plan.

A copy of the strategic priorities can be found by clicking here: [Strategic Priorities 2021/2024](#)

The priorities are detailed below:

Strategic Priority	What we will do to deliver this priority
To embed the learning from Safeguarding Adult Reviews (SARs) into organisational practice	<ul style="list-style-type: none">• Partners will contribute to the SAR process and play a key role to identify the relevant learning• We will embed a process to identify immediate learning and implement this swiftly• We will ensure the learning is SMART with key success criteria in place• Partners will provide strong evidence to assure the TDSAP that sustained improvements have been embedded• Promote multi-organisational communication, ensuring cooperation as an underlying key principle• Develop swift and dynamic processes for delivery of Safeguarding Adults Reviews• Each Safeguarding Adults Review will have an underlying principle to 'Focus on the Learning' for each organisation• We will regularly monitor, identify and resolve reoccurring SAR themes to prevent reoccurrence

Strategic Priority	What we will do to deliver this priority
<p>To work with partners to better understand and reduce the risk of ‘Hidden Harm’, especially in the context of COVID 19</p>	<ul style="list-style-type: none"> • Support and encourage all safeguarding partners to focus on the ‘Hidden Harm’ that is usually out of sight from public view and often not recognised or reported • Ensure that the emphasis is on having a culture of ‘spotting early signs’ to prevent risks escalating • Use COVID 19 data and information to seek assurance that partners are all uncovering and responding to hidden harm • Ensure that all safeguarding partners who work with people who have needs for care and support, exercise professional curiosity and take appropriate action • Embed the theme of ‘professional curiosity’ within multi agency case audits (MACA) • Develop and deliver a multi-organisational workshop and awareness campaign for partners and service representatives to better understand, encourage and support professional curiosity and escalation within their organisations
<p>To improve outcomes for people with needs for care and support by finding the right solution for them</p>	<ul style="list-style-type: none"> • To seek assurance that partners and service representatives work together to establish more effective coordination to achieve person centred solutions • Work with partners and service representatives to better understand and embed a creative approach to finding effective solutions for people with complex lives • We will develop and share key data and information to help develop effective communications and co-ordination between partner organisations, including strengthening links with the districts and community safety partners • We will focus on preventative strategies to better understand how we can avoid the need for safeguarding intervention • We will work with service representatives and commissioning partners to better understand people’s needs and support them to achieve their desired outcomes • To have regular assurance from partners that people are safeguarded during and after the COVID-19 pandemic and that attention to safeguarding continues in accordance with statutory responsibilities, recognising that some people will be put at greater risk as a consequence of the pandemic

Strategic Priority	What we will do to deliver this priority
<p>Improving Involvement and Engagement with people in receipt of safeguarding services</p>	<ul style="list-style-type: none"> • We will build on past Safeguarding Awareness Campaigns by targeting communications within our communities to raise further awareness of safeguarding • We will learn from COVID 19 experiences and use this feedback to shape future engagement • We will work with key partners to improve the interface with children's services especially for those who transition to adult services • To seek assurance that all partners are involving and listening to people about their experience of safeguarding • Ensuring that all people are listening to, valuing and responding to relatives, friends and people in communities • The partnership will have a focus on 'Making Safeguarding Personal' to ensure that safeguarding is person-led and outcome-focussed • We will continue to invest and engage with community groups to ensure the 'voice of the person' is central to partnership working

DEVON AUDIT PARTNERSHIP COMMITTEE

15 November 2021

Present:-

Councillors Scott, Craigie, Hackett, Loxton, Penny, Davies, Spencer and Roome

Apologies:-

Councillors Hall, Bingley, Mahony, Kennedy and Austen

In Attendance:-

Councillor Ewings

Members attending in accordance with Standing Orders 8 and 25

9 **Meeting Quorum**

The meeting of the Partnership was not quorate, however members discussed informally the matters on the agenda and the views of the Committee would be taken to the next meeting in March to ratify any decisions made.

10 **Minutes**

RESOLVED that the Minutes of the meeting held on 7 July 2021 be signed as a correct record.

11 **Items Requiring Urgent Attention**

There was no item raised as a matter of urgency.

12 **Updated Business Plan 2021 to 2026**

The Committee considered the report of the Director of Finance (DF/21/02) providing a summary of the direction of the Partnership for the coming five years.

Members noted:

- the key role that technology will play in the future, along with the risk that cyber security and data security present.

Agenda Item 14a

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DEVON AUDIT PARTNERSHIP COMMITTEE

15/11/21

- the transition to hybrid operating models that balance remote and on-site working arrangements.
- the need to invest in both staff and technology to continue to provide the level of assurance partners and clients need.
- that growth is likely to be limited, however officers will continue to seek out new opportunities that will both strengthen the Partnership and provide better quality services to the wider not-for-profit sector.
- the strength of the apprenticeship programme, the need to balance the staff profile with retirements and continue to attract a workforce from different backgrounds.
- Members commended the Head of Devon Audit Partnership for the number of apprenticeship opportunities the Partnership continues to create.

It was **MOVED** by Councillor Davies, **SECONDED** by Councillor Roome and

RESOLVED

that the Committee notes the updated Business Plan covering the five-year period 2021 to 2026.

13 **Staff Survey Results**

The Committee considered the report of the Director of Finance (DF/21/03) providing an extract of the key results from the 2021 staff survey.

Members noted:

- that while the results are pleasing overall DAP Management need to continue to work on those areas that require improvement.
- the importance of surveying staff, and welcomed the continued focus from the Partnership on improvement but expressed some concern about how anonymous staff surveys can always be.

It was **MOVED** by Councillor Scott, **SECONDED** by Councillor Loxton and

RESOLVED

that the Committee notes the extract of staff survey results from 2021, and the comparison to the 2018 results.

14 **Six Month Update Report 2021/22**

The Committee considered the report of the Director of Finance (DF/21/04) summarising activity in the first six months of 2021/22. The report recognises the continuing challenges brought about by the Covid pandemic and the impact that this has had on the work of the team.

Members noted:

- the extension of the contract with Devon and Somerset Fire and Rescue Service.
- the Partnership has been unsuccessful in 3 recent bids to academies. Feedback indicates that the bids were competitive, but others were able to offer delivery in less days, and thus less cost. Officers will look further at the feedback and see how to react to this.
- customer service surveys continue to show very positive feedback with a near 99% being "satisfied" or better across the Partnership's services.
- indicators show a slight deteriorating in performance from the previous year, but this should be considered against the backdrop of the ongoing need to respond to the Covid pandemic, and also a relatively high level of staff turnover in the period.

It was **MOVED** by Councillor Scott, **SECONDED** by Councillor Roome and

RESOLVED

that the Committee notes the six month update report from the Head of Devon Audit Partnership.

15 Budget Monitoring 2021/22 - Month 6

The Committee considered the report of the Director of Finance (DF/21/05) monitoring the Budget of the Partnership at month 6 indicating a small surplus at the year end (circa 1k).

Members noted:

- staff Costs £120k increase – mainly due to additional staff required to support additional income gained.
- some plans from last year slipped into April / May 2021, with probably some work from 2021/22 moving into 2022/23. Members expressed concern that things that need to be looked at may get missed and that it was too important to delay some of these items.

It was **MOVED** by Councillor Scott, **SECONDED** by Councillor Hackett and

RESOLVED

(a) the projected financial outturn position of DAP be noted.

(b) the variances and reasons be noted.

Agenda Item 14a

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DEVON AUDIT PARTNERSHIP COMMITTEE

15/11/21

16 Updated Risk Register November 2021

The Committee considered the report of the Director of Finance (DF/21/06) setting out the updated Strategic and Operational risks facing the Partnership.

Members noted:

- the key risks that the Partnership currently faces includes a partner leaving; and the ongoing impact of Covid on the Partnership's plans and on the ability to provide an annual audit opinion.
- the need for Partnership management continue to monitor its mitigating actions to ensure that these risks do not materialise.

It was **MOVED** by Councillor Penny, **SECONDED** by Councillor Hackett and

RESOLVED

- (a) the updated Strategic and Operational risk register be noted.
- (b) the actions in place to reduce risks to an acceptable level be noted.

17 Quality Assurance & Improvement Plan

The Committee considered the report of the Director of Finance (DF/21/07) setting out the areas for advancement in the coming 12 months.

Members noted:

- Recent Public Sector Internal Audit Standards Excellence assessment which the Partnership has passed, but along with forthcoming customer service external assessment these will both feed into the development plan.
- the new Deputy Head of DAP has been appointed.
- the importance of whistleblowing.

It was **MOVED** by Councillor Scott, **SECONDED** by Councillor Hackett and

RESOLVED

- (a) the current Quality Assurance & Improvement Plan Action Plan be noted.
- (b) the challenges for the future, and the actions being taken by management to react to these challenges be noted.

18 Future Meetings

The next meeting is scheduled for 8 March 2022.

NOTES:

1. *Minutes should always be read in association with any Reports for a complete record.*
2. *If the meeting has been webcast, it will be available to view on the [webcasting site](#) for up to 12 months from the date of the meeting*

* **DENOTES DELEGATED MATTER WITH POWER TO ACT**

The Meeting started at 10.30 am and finished at 11.28 am

Agenda Item 14a

DEVON EDUCATION FORUM

17 November 2021

Present:-

Schools Members

Primary Headteachers

Mr A Dobson	Marwood Primary
Mr J Stone	Denbury Primary
Ms R Shaw	Exeter Learning Academy Trust (Academy)
Mr P Walker	First Federation Trust (Academy)

Primary Governors

Ms K Brimacombe	Whitchurch Primary
Ms E Stubbs	St Peter's CE Primary
Mr A Hines	Rydon Primary (Education SW Trust)(Academy)

Secondary Headteachers

Mrs S Crook	Federation of Tiverton Schools
Ms L Heath	Uffculme Academy Trust (Academy)
Mr G Hill	Ventrus Multi Academy Trust (Academy)

Secondary Governors

Ms J Elson	Exmouth CC (Academy)
Mrs J Larcombe	Uffculme Academy Trust (Academy)
Mr A Walmsley	The Ted Wragg Multi Academy Trust (Academy)

Nursery School

Mrs S Baker	Westexe
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Special Headteacher

Mr K Bennett	Marland School
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Special Governor

Mrs F Butler	Marland School (Chair)
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Alternative Provision

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Non-Schools Members

Ms S Lockwood	Exeter Diocesan Board of Education
Ms L Wright	Early Years, Private & Voluntary Independent

Observer

Councillor A Leadbetter	Cabinet Member – Children's Services and Skills
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Agenda Item 14b

2

DEVON EDUCATION FORUM

17/11/21

Apologies

Mr B Blythe
Mr A Davis
Mr M Gurney

PETROC
Exmouth CC (Academy)
Teachers Consultative Committee (TCC)

11 Minutes

DECISION:

That the minutes of the meeting held on 16 June 2021 be signed as a correct record, subject to adding Ms Brimacombe (Primary maintained governor) to the list of apologies for the meeting.

12 Matters Arising from the Last Meeting and Report back on Issues Raised with Cabinet/f40

DISCUSSION:

Members received a copy of f40 letter for information, to Prime Minister Boris Johnson, 7 October 2021 ahead of the Comprehensive Spending Review (end of October), urging him to make education and SEND/SEND review a key priority. Following the recent Cabinet reshuffle and the appointment of new education ministers, f40 had also written to Education Secretary Nadhim Zahawi and Schools Minister Robin Walker, regarding these concerns and requesting an opportunity to meet with them to discuss school funding in more detail.

13 Membership

DISCUSSION:

(a) The following membership changes were noted, following elections for ad-hoc vacancies for Autumn 2021:-

Primary Maintained (Governors):-

Ms E Stubbs

(and resignation of Mr L Cottrell, substitute member)

Secondary Academies (HT):-

Mr A Davis and Ms L Heath were now full members (instead of substitute members)

Mr R Gammon (substitute member)

SENTient (special school HT):-

Mr K Bennett

Ms S Pickering (substitute member)

(b) Members were also advised that Early Years PVI representative, Ms L Wright, was also standing down from the Forum following this meeting.

The Chair expressed appreciation on behalf of all Members of Ms Wright's support and contribution to the Forum, to be placed on record.

14 Head of Education & Learning Update

DISCUSSION:

The Head of Education & Learning had circulated the following documents with the agenda:-

(a) Annual Education & Learning Performance Report Autumn 2021 (based on published data to 21 October 2021); and

(b) Update on the SEND (Special Educational Needs & Disability) 100 Project

In relation to school performance, (a) above:-

Members noted that the usual key stage assessment and performance tables data had not been able to be included due to changes resulting from the pandemic. However other key information/data and Devon County Council key stage 4 data was included. The Report's main aim continued to be measuring outcomes that could impact on disadvantaged children and inform decisions on action required.

Department for Education (DfE) year 11 data for the 2019/20 academic year indicated an encouraging 94% take up in and sustained, post 16 education. This put Devon in the top quartile nationally.

In response to questions on the Report's exclusion data, Members noted that this indicated a reduction in permanent exclusions from 60 in 2019/20 to 51 in 2021 with these numbers likely to have been impacted by the pandemic. Devon's exclusion trend was downward (down in primary, slight rise in secondary) and slightly better than the latest available national rate (2019/20).

Fixed period exclusions had risen significantly in Devon secondary schools (often the case when permanent exclusions fell) from 3235 in 2019/20 to 4963 in 2020/21 (and significantly higher than latest national data 2019/20), with an increase in disruptive behaviour as pupils struggled to cope with changes in routine/return to school after pandemic lockdowns.

Secondary school Forum Members would welcome further data analysis on the increased exclusions to determine trends etc and how the Local Authority may further support schools.

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The Head of Education & Learning would welcome joint working with secondary school representatives to reduce exclusion rates.

In relation to SEND 100 Project, (b) above, discussion included:-

-that within the two levels of proposed SEND support (including 8 SEND hubs Level 1 and 4 locality teams Level 2) no additional administrative costs were anticipated at this stage due to existing provision. The SEND support and key principle of the project was to provide access to earlier wrap around, holistic, multi-agency support for children and young people and reduce, not increase bureaucracy;

-multi-agency team support would be commissioned through WAVE and hospital schools in relation to pupils with medical/SEN/significant behavioural needs; and

-whether the SEND 100 Project was on target, both financially and due to difficulties in recruitment of some key roles within schools and health. Officers advised that next year's budgets were still yet to be confirmed and that the Council's Cabinet had discussed recruitment difficulties in Devon due to a number of factors, including housing costs and availability (Cabinet, 10 November 2021 meeting). Forum Headteachers were happy to offer support regarding recruitment.

DECISION:

(a) that the Head of Education & Learning provide further secondary exclusions data analysis and details of LA support, to all secondary school Headteachers; and

(b) that an update be made to the next DEF meeting on the SEND 100 Project, progress, together with any Devon recruitment difficulties.

ACTION:

Head of Education & Learning (Dawn Stabb)

15 Finance Update

DISCUSSION:

The Forum considered the joint Report of the Chief Officer for Children's Services and Director of Finance (Designate) (DEF/21/08) on Dedicated Schools Grant (DSG) budget monitoring, month 6 (2020/21).

The Forum also received the minutes of the Schools Finance Group (SFG) of 8 September and 3 November 2021, noting the respective minutes impacting

on Forum business today. (Note: SFG minutes to be considered prior to the main finance business on future agendas).

The Report (DEF/21/08) covered:-

-The month 6 outturn forecast for 2021/22 showed a significant overspend in the overall Dedicated Schools Grant (DSG) of £36.0 million, associated with the continued demand on High Needs and the growing demand on Special Educational Needs (SEN) placements within the Independent Sector despite creating more places within Devon's Special Schools;

-The High Needs Block had a saving of £371,000, due to savings within independent special school fees following credit notes received and year end adjustments not required;

-The Management Action of £2.7 million reflected savings expected to be delivered in 2021/22. This projected a cumulative DSG deficit to March 2022 of £85.0 million;

-This could have a considerable impact on future education budgets within the DSG as well as impacting on the financial sustainability for Devon County Council. An urgent action was still required to reduce the demand on Education Health & Care Plans (EHCPs) and Independent placements.

Discussion included:-

Members recognised the significant ongoing challenges of the High Needs Block and would be further considering what they could do next to assist the continued drive forward towards an improved position.

DECISION:

That month 6 (2020/21) DSG monitoring position as set out in Report (DEF/22/08) be noted, including the significant ongoing challenges of the High Needs Block and overall budget position.

ACTION:

Director of Finance (Designate) (Adrian Fox)

16

Dedicated Schools Grant (DSG) Deficit Management Plan

DISCUSSION:

The Forum considered the joint Report of the Chief Officer for Children's Services and Director of Finance (Designate) (DEF/21/09) on proposals to address the cumulative deficit of £85m to March 2022 and discussions with Department of Education on the management plan.

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The Forum also noted the respective minutes of the Schools Finance Group (SFG) of 8 September and 3 November 2021.

The Report (DEF/21/09) covered:-

An overview

Management actions

The medium term

Impact of cost reduction on overall deficit

Risks.

Members' discussions included:-

-what aspects of the plan remained on target, together with reasons and proposals for any slippage of the various actions (eg resource bases, paragraph 2.3 and continued demand for new Education Health & Care Plan (EHCP) requests, paragraph 2.6 of the Report);

-that a detailed discussion at the next meeting on the Council's position on managing the deficit and role of the Forum would then enable Forum members to give a holistic resume to schools;

-that the Forum was looking for more certainty and clarity at the January 2022 meeting (e.g. including medium term plan, paragraph 3.1 of the Report);

-that the Department for Education (DfE) expert panel had confirmed the plan covered all necessary steps but recognised that the detailed plan was ambitious (as previously stated by the LA), work was actively in progress between the DfE and LA, with DfE challenge and support planned for the new year. Some Members were concerned at how realistic various aspects of this complex plan were to achieve within target;

-clarity sought on who (e.g. LA or Forum) and when would a decision be made on whether the work of the SEND (Special Educational Needs & Disability) 100 Projects would continue permanently after their initial year of running and their initial year of funding, given the projects' successful progress but in view of some timeline slippage?

In response to the above, Officers advised that although there were some delayed starts, there were positive indications that the work was starting to see an impact in supporting children to remain in their mainstream school. This would be monitored to see whether the cost of the project could be self-sustaining and if the Budget preparation for 2022/23 would require review for the new financial year in regard to any carry forwards. Whilst the High Needs Block (HNB) budget allocation was ultimately an LA decision, a school view via this Forum would be sought. A Safety Valve mechanism was also to be considered.

The success of SEND transformation however required a whole system approach including the direct support of individual schools. Discussions with

the School Leadership Service (headteachers' association) and peer challenge on engaging schools would be welcomed.

DECISION:

(a) that the current position of the DSG Deficit Management Plan as set out in Report (DEF/21/09) be noted, whilst recognising this was ambitious due to obstacles, that there was a reduction in the amount that could be achieved this year, together with progress of the DfE's involvement in the Plan.

(b) that a detailed report be made to the next Forum meeting on the County Council's position on the substantial and sustained deficit and how this was to be managed and reduced;

(c) that guidance notes regarding the HNB being an LA process, together with details of DfE agreed management plans with other LAs be circulated to Forum members for information.

ACTION:

Chief Officer for Children's Services (Melissa Caslake) – (b)
Director of Finance (Designate) (Adrian Fox) – (c)

17 2022-23 Schools Funding Arrangements Consultation Responses

DISCUSSION:

The Forum considered the joint Report of the Chief Officer for Children's Services and Director of Finance (Designate) (DEF/21/10) on Devon's Schools Funding Arrangements 2022-23 consultation with schools (closed 17 October 2021) which informed the Report's proposals. Only 19% of all schools responded (consultation engagement would be considered for future consultations).

The Forum also noted the respective minutes of the Schools Finance Group (SFG) of 8 September and 3 November 2021.

The Report (DEF/21/10) covered proposals for:-
Schools Funding
Movement between Blocks
Delegation and De-delegation
Central School Services Block*

*(clarification in relation to paragraph 3.18 that pooled arrangements for SENTient Headteachers would continue).

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DECISION:

(a) that Cabinet be recommended:-

that the proposals for the 2022-23 Schools Revenue Funding Formula be approved, ie:-

(i) as set out in section 3.1 of Report (DEF/21/10);

(ii) that the Minimum Funding Guarantee to be set at plus 2% with the option to review in December 2021 after settlement received; and

(iii) that the surplus funding to the Additional Educational Needs Factors (FSM, FSM Ever 6 and Low Prior Attainment);

(Note: that the final funding rates may change subject to affordability when the October 2021 pupil data and Schools Block Dedicated Schools Grant settlement was confirmed in late December 2021).

(Vote: Schools, Academies and PVI members)

(b) that Cabinet be recommended:-

that no transfer take place between blocks for 2022/23, as set out in section 3.8 of Report (DEF/21/10);

(Vote: Schools, Academies and PVI members)

(c) that the De-Delegation proposals for maintained primary and maintained secondary schools as listed in section 3.9 and appendix 2 of Report (DEF/21/10);

(Vote: Maintained primary representatives)

(Vote: Maintained secondary representatives)

(d) that Central Services funding allocations in sections 3.16 – 3.20 of Report (DEF/21/10); be approved, i.e.:-

(i) to contribute £60,000 for the Emotional, Psychological and Social Wellbeing Service;

(ii) to top slice £223,000 from the Schools Block to fund the Phase Associations (Devon SLS and DAG) for one year; and

(iii) to retain the funding centrally at the increased £5.35 rate per pupil (£490,000) for Schools Admissions Service.

(Vote: Schools, Academies and PVI members)

ACTION:

Director of Finance (Designate) (Adrian Fox)

18 **Maintained Primary and Infant Schools with Lowered Age Ranges - De-delegation**

DISCUSSION:

The Forum considered the joint Report of the Chief Officer for Children's Services and Director of Finance (Designate) (DEF/21/11), following an approach from maintained primary schools applying to the Financial Intervention Panel, Schools (FIPS) to request that they have the opportunity to buy into the contingency fund, to recognise the early years provision being covered should they find themselves in financial difficulties. There were currently 50 maintained schools that had lowered their age range to add a nursery class or a Foundation Stage Unit (FSU)

The Forum also noted any respective minutes of the Schools Finance Group (SFG) of 8 September and 3 November 2021.

It was further noted that the current level of funding within contingency and maternity was sufficient to support these additional demands that could arise. Maternity cover eligibility would apply to all school staff.

DECISION:

That the de-delegation within the Maintained Primary and Infant Schools set out in the proposal from 2022/23 be approved and review annually as per other phases.

(Vote: Maintained Primary representatives).

ACTION:

Director of Finance (Designate) (Adrian Fox)

19 **Standing (and other) Groups**

DISCUSSION:

(a) Standing Groups

(i) Schools' Finance Group (SFG) revised Terms of Reference

Members noted that SFG had reviewed its Terms of Reference as requested by the Forum, to ensure any changes within the group's work were reflected, i.e:- a greater emphasis on the High Needs Block , less emphasis on funding

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formula factors and informing decision making on the Dedicated Schools Grant management action plan. SFG membership composition was to reduce to 3 secondary and primary school representatives (previously 4) and the inclusion of 1 Alternative Provision representative.

(ii) School Organisation, Capital and Admissions (SOCA)

Members received the minutes of the meeting held on 21 September 2021.

(b) Other Groups: SEND Transformation

Nil.

DECISION:

That the Schools Finance Group revised Terms of Reference be approved, subject to revised wording in the penultimate bullet point of section 2, to read as follows:-

“Make operational decisions as delegated by Schools Forum.”

ACTION: Head of Education & Learning (Heidi Watson-Jones)

20 Correspondence

Nil.

21 Dates of Future Meetings

The Calendar may be viewed at

<https://democracy.devon.gov.uk/mgCalendarMonthView.aspx?GL=1&bcr=1>

Please check venue/arrangements (see link) as these are subject to change:-

Meetings held at 10am:

Wednesday 19 January 2022

Wednesday 16 March 2022

Wednesday 22 June 2022

Wednesday 23 November 2022

Wednesday 18 January 2023

Wednesday 22 March 2023.

DECISION:

That in view of the longer time period between the June and November Forum calendared meetings, the Director of Finance (Designate) prepare a finance

summary update to be circulated to Members during early September each year.

ACTION:

Director of Finance (Designate) (Adrian Fox), for circulation by County Solicitor (Fiona Rutley)

NOTES:

1. *Minutes should always be read in association with any Reports for a complete record.*
2. *If the meeting has been webcast, it will be available to view on the [webcasting site](#) for up to 12 months from the date of the meeting*

* **DENOTES DELEGATED MATTER WITH POWER TO ACT**

The Meeting started at 10.00 am and finished at 12.05 pm

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DEVON COUNTY COUNCIL

COUNCIL/CABINET FORWARD PLAN

In line with the public's general rights of access to information and the promotion of transparency in the way which decisions are taken by or on behalf of the Council, Devon County Council produces a Forward Plan of any Key Decisions to be taken by the Cabinet and any Framework Decisions to be made by the County Council. The Plan normally covers a period of a minimum of four months from the date of publication and is updated every month.

The County Council has defined key decisions as those which by reason of their strategic, political or financial significance or which will have a significant effect on communities in more than one division are to be made by the Cabinet or a Committee of the Cabinet. Framework Decisions are those decisions, which, in line with Article 4 of the Council's Constitution must be made by the County Council.

The Cabinet will, at every meeting, review its forthcoming business and determine which items are to be defined as key decisions and the date of the meeting at which every such decision is to be made, indicating what documents will be considered and where, in line with legislation, any item may exceptionally be considered in the absence of the press and public. The revised Plan will be published with the papers for the meeting. *Where possible the Council will attempt to keep to the dates shown in the Plan. It is possible that on occasion may need to be rescheduled.* Please ensure therefore that you refer to the most up to date Plan.

Click to see an [up to date version of the Forward Plan](#) on the Council's web site at any time.

Also see the website for [Copies of Agenda and Reports of the Cabinet or other Committees of the County Council](#) referred to in this Plan

FORWARD PLAN

All items listed in this Forward Plan will be discussed in public at the relevant meeting, unless otherwise indicated for the reasons shown

Any person who wishes to make representations to the Council/Cabinet about (a) any of the matters proposed for consideration in respect of which a decision is to be made or (b) whether or not they are to be discussed in public or private, as outlined below, may do so in writing, before the designated Date for Decision shown, to The Democratic Services & Scrutiny Secretariat, County Hall, Exeter, EX2 4QD or by email to: members.services@devon.gov.uk

PART A - KEY DECISIONS

(To Be made by the Cabinet)

Date of Decision	Matter for Decision	Consultees	Means of Consultation*	Documents to be considered in making decision	County Council Electoral Division(s) affected by matter
<i>Regular / Annual Matters for Consideration</i>					
8 December 2021	Target Budget and Service Targets for 2022/2023			Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions

9 March 2022	Flood Risk Management Action Plan 2022/2023 Update on the current year's programme and approval of schemes and proposed investment in 2022/2023	Liaison through Devon Operation Drainage Group	All other Risk Management Authorities	Report of the Head of Planning, Transportation and Environment outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
11 February 2022	Admission Arrangements and Education Travel Review: Approval to admission arrangements for subsequent academic year	School / Academies /Members	Online	Report of the Head of Education and Learning outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
13 April 2022	Highway Maintenance Capital Budget and On Street Parking Account: Progress on the 2021/2022 Capital Programme and Proposals for the 2022/2023 Programmes			Report of the Chief Officer for Highways, Infrastructure Development and Waste outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
13 July 2022	Revenue and Capital Outturn 2021/2022	N/A	N/A	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
14 September 2022	Adult Social Care - Sufficiency Assessment - Annual Return			Report of the Locality Director outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions

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Specific Matters for Consideration					
8 December 2021	Approval of a Framework for prioritising 20mph projects	Vision Zero - Road Safety Partnership South West	Meeting/Email	Report of the Chief Officer for Highways, Infrastructure Development and Waste outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
8 December 2021	Future of North Devon Link Service			Report of the Locality Director outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
12 January 2022	Budget Monitoring - Month 8		N/A	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
12 January 2022	Clean Growth Opportunities – East Devon case study – adoption of a report to feed into the EDDC local plan consultation	n/a	n/a	Report of the Head of Economy, Enterprise and Skills outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	Broadclyst
12 January 2022	Contract Extension for Children’s Fostering Framework			Report of the Chief Officer for Children's Services outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions

12 January 2022	Emergency Duty Service Review		Subject to staff consultation	Report of the Head of Childrens Social Care outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
9 March 2022	Budget Monitoring - Month 10	N/A	N/A	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
9 March 2022	Stover Park - Approval of funding bid to the National Lottery Heritage Fund for Restoring the Park	Restoring Stover Advisory Board	Quarterly progress updates throughout development phase	Report of the Chief Officer for Highways, Infrastructure Development and Waste outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	Bovey Rural
9 March 2022	Plymouth and South Devon Freezone	Land owners, Plymouth and South Devon Freezone Stakeholder Group	Meetings and an Event	Report of the Head of Planning, Transportation and Environment, Head of Economy, Enterprise and Skills, Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	Bickleigh & Wembury
14 September 2022	Budget Monitoring - Month 4	N/A	N/A	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions

9 November 2022	Budget Monitoring - Month 6	N/A	N/A	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
9 November 2022	Childcare Sufficiency Assessment - Annual Return			Report of the Head of Education and Learning outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
PART B -FRAMEWORK DECISIONS (Requiring approval of the County Council)					
Date of Decision	Matter for Decision	Consultees	Means of Consultation**	Documents to be considered in making decision	County Council Electoral Division(s) affected by matter
19 January 2022 17 February 2022	Pay Policy Statement 2022/2023	Appointments , Remuneratio n and Chief Officer Conduct Committee	Meetings	Report of the County Solicitor outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions

11 February 2022	Revenue Budget, Medium Term Financial Strategy 2022/2023 - 2025/2026 and the Capital Programme for 2022/2023 - 2026/2027	Consultation with Trade Unions / Business and those that champion the interests of older people and the voluntary sector. Scrutiny Committees	Meetings	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
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PART C - OTHER MATTERS
(i.e. Neither Key Nor Framework Decisions)

Date of Decision	Matter for Decision	Consultees	Means of Consultation**	Documents to be considered in making decision	County Council Electoral Division(s) affected by matter
	<i>Regular / Annual Matters for Consideration</i>				

<p>Between 8 December 2021 and 8 May 2025</p>	<p>Standing Items, as necessary (Minutes, References from Committees, Notices of Motion and Registers of Delegated or Urgent Decisions)</p>	<p>As necessary</p>		<p>Report of the TBC outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.</p>	<p>All Divisions</p>
<p>Between 8 December 2021 and 8 May 2025</p>	<p>Standing Items, as necessary (Minutes, References from Committees, Notices of Motion and Registers of Delegated or Urgent Decisions) <i>[NB: Items relating to the letting or occupancy of individual holdings may contain information about, or which is likely to reveal the identity of, an applicant for a holding and about the financial and business affairs of the Council and any prospective or existing tenant that may need to be discussed in the absence of the press and public]</i></p>	<p>To be considered at the Farms Estates Committee, including any advice of the Council's Agents NPS South West Ltd</p>		<p>Report of the Head of Digital Transformation and Business Support, Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.</p>	<p>All Divisions</p>
<p>8 December 2021</p>	<p>Devon Safeguarding Adults Annual Report</p>			<p>Report of the Chair of the Board outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.</p>	<p>All Divisions</p>

8 December 2021	Treasury Management Mid Year Report	Corporate Infrastructure and Regulatory Services Scrutiny Committee	Committee	Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
13 July 2022	Treasury Management Stewardship Outturn Report	Corporate Infrastructure and Regulatory Services Scrutiny Committee		Report of the Director of Finance outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
13 July 2022	Public Health Annual Report 2021/2022			Report of the Director of Public Health outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
9 November 2022	Torbay and Devon Safeguarding Adults Partnership - Annual Report			Report of the Chair of the Board outlining all relevant considerations, information and material including any equality and / or impact assessments, as necessary.	All Divisions
	<i>Specific Matters for Consideration</i>				

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