

**Report of the Cabinet Member for
Community, Public Health, Transportation and Environmental Services**

Introduction

I have been asked to report to Council by Members as follows:

1. by Councillor Hannaford on the current status of varroa destructor mite infections on Devon's honeybees, including what work is being done to combat and contain it working with key partners, bee keepers, regulators, and landscape managers and whether there was any new evidence in Devon to suggest a cross contamination into other wild bee species locally?
2. by Councillor Hannaford on the latest trends, figures, rates and convictions regarding domestic violence and sexual abuse in Devon. Specifically, to include places of safety capacity, prevention work, and child centred practice. Also, with the current DVSA sector drivers from the pandemic, mental health and acute social issues, and the economic downturn, what modelling work is being done to try and scope out future service pressures?
3. by Councillor Hannaford on the rollout of the scheme to support vulnerable children and families in Devon
4. by Councillor Hannaford on Covid-19 developments to include pressing issues around vaccinations, secondary school infections, infection rates, extended or additional lockdowns, and the potential repercussions of a Christmas relaxation of restrictions
5. by Councillor Atkinson on the NAO October report on Improving local bus services in England outside London – to include its recommendations and their relevance to Devon and what the Council proposes to do to take these forward.

Response

1. Varroa destructor mite

Current status of the Varroa destructor mite infections on Devon's honey bees

Varroa destructor, a global pest of the European honey bee (*Apis mellifera*), was first reported in the UK, in Devon, in 1992 and is now present in every known honey bee colony across the county. This is having a costly impact on bee keeping (apiculture). If left untreated, Varroa infection will lead to the loss of a honey bee colony within 2-3 yearsⁱⁱ. The mites are also exhibiting widespread resistance to the pyrethroids – the insecticides that were initially used to treat infected honey bee colonies.

What work is being done to combat and contain it working with key partners, beekeepers, regulator and landscape managers?

Over 90% of beekeepers in the UK control Varroa mite in accordance with the 'managing Varroa' guide provided by BeeBaseii. This consists of mechanical treatment of the colony at low numbers of infestation, swapping to chemical control with the introduction of Varroa medicines when mite populations surpass 1,000 to reduce further resistance to treatment in the Varroa mite. Between 2009 and 2020 the National Beekeepers Union has hosted 674 training events in the South West, with 18,632 participants learning how to manage bee pests and diseases. In addition, beekeepers in Devon are encouraged to join Beebase and one of the 11 local beekeeping associations, where they receive updates into the latest pest control including Varroa. Through these associations beekeepers from Devon are now participating in university led research, including the 'ReViVe' project, to better understand resistance to Varroa and winter colony losses and 'B4: Bringing Black Bees Back' project in collaboration with the University of Plymouth. The latter is attempting to use native 'British black' honey bee subspecies (*Apis mellifera mellifera*), locally adapted to Devon and, potentially, with resistance to Varroa mite, in apiculture across the county. There is some evidence that bees in Devon are developing resistance to the Varroa mite through a new 'hygienic' behaviour.

The impact of Varroa mites on the health of a honey bee colony can be exacerbated by other stressors, such as pesticides, poor weather and limited food resources. Devon County Councils grass cutting and 'Special Verge' policies attempt to reduce these stressors by providing food sources along roads throughout the county. The Devon Local Nature Partnership has also promoted effort to increase the diversity of food sources for pollinators, with 15 projects organised by over 30 partners, while the 'Get Devon Buzzing Campaign' raised awareness and facilitated people across Devon to take positive conservation action .

Is there any new evidence in Devon to suggest a cross contamination into other wild bee species locally?

In the UK the Varroa mite is a parasite exclusively of honey bees and, therefore, there is no cross contamination between domesticated and wild bee species. However, recent work by the University of Exeter has shown the Varroa mite, when present in a hive, increases the prevalence of deformed wing virus (DWV) in the honey bees, which increases the chance of this virus being spread to wild bumblebee species visiting the same flowers . By intervening when Varroa mites are first found in a hive, the chance of this virus infecting bumblebees is reduced.

References:

- ¹ Thompson, H., Ball, R., Brown, M., & Bew, M. (2003). Varroa destructor resistance to pyrethroid treatments in the United Kingdom. *Bulletin of Insectology*, 56, 175-184.
- ¹ Department for Environment, Food and Rural Affairs (2020) Healthy Bee Plan Review
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- ¹Exeter DBKA (2017) High mite levels in colonies
- ¹ Waite, R., Brown, M., & Thompson, H. (2003). Hygienic behaviour in honey bees in the UK: a preliminary study. *Bee World*, 84(1), 19-26.
- ¹ Martin, S. J., Hawkins, G. P., Brettell, L. E., Reece, N., Correia-Oliveira, M. E., & Allsopp, M. H. (2019). Varroa destructor reproduction and cell re-capping in mite-resistant *Apis mellifera* populations. *Apidologie*, 1-13.

¹ Evans, J. D., Saegerman, C., Mullin, C., Haubruge, E., Nguyen, B. K., Frazier, M., ... & Tarpay, D. R. (2009). Colony collapse disorder: a descriptive study. *PloS one*, 4(8), e6481.1

¹ <https://www.devon.gov.uk/roadsandtransport/maintaining-roads/trees-and-vegetation-2/grass-cutting/>

¹ <https://www.naturaldevon.org.uk/devons-natural-environment/pollinators/>

¹ Ramsey, S.D., Ochoa, R., Bauchan, G., Gulbranson, C., Mowery, J.D., Cohen, A., et al. (2019). *Varroa destructor* feeds primarily on honey bee fat body tissue and not hemolymph. *PNAS*, 116, 1792–1801.

¹ Manley, R., Temperton, B., Doyle, T., Gates, D., Hedges, S., Boots, M., & Wilfert, L. (2019). Knock-on community impacts of a novel vector: spillover of emerging DWV-B from *Varroa*-infested honey bees to wild bumblebees. *Ecology letters*, 22(8), 1306-1315.

¹ University of Exeter (2019) Honey bee mite raises bumblebee virus risk

https://www.exeter.ac.uk/news/featurednews/title_720410_en.html

2. Domestic Violence and Sexual Abuse in Devon

Devon's response to domestic violence and abuse spans many agencies. The response is overseen by the Safer Devon Partnership and is the Partnership's top priority. Sexual violence is often present within domestic abuse but also occurs in other contexts. Sexual violence is also one of the Safer Devon Partnership's priorities. This answer focuses on domestic abuse as the trends and responses are different to sexual violence.

The Community Safety Strategic Assessment brings together key information to assess crime, disorder and safety issues across Devon, including both domestic abuse and sexual violence. The Assessment for 2019-20 shows a 3% increase in incidents recorded by police linked to domestic abuse in Devon (11,000 incidents, 16.8 incidents per 1,000 population). However, the Office for National Statistics notes that police figures in recent years have been greatly affected by better reporting and increased willingness of victims to seek support. The Crime Survey for England and Wales suggests that there has been little change in the prevalence of domestic abuse in recent years. In the most recent quarter (July-September 2020) there has been small increase in Domestic Abuse crimes recorded compared to the same period in the previous year, but a small decrease in the number of domestic abuse incidents.

It is certainly the case that there has been a steady increase in referrals and requests for specialist support for victims of domestic abuse in Devon in recent years, and a sharp increase since the Spring COVID-19 lockdown. The specialist domestic abuse support service for Devon commissioned by Devon County Council and led by Splitz Support Service saw a 60% increase in calls in April 2020 compared to April 2019. The demand has since eased but is still around 50% higher than the previous year. An increase in the complexity of cases has intensified the pressure caused by the increase in volume of demand. This includes mental health and drug and alcohol issues being worsened by lockdown pressures, child contact issues, perpetrators moving back into the family home and other factors. The Council has responded to these pressures by allocating an additional £250k of funding from the COVID-19 emergency funding received from government. This will enable the service to increase capacity in its helpdesk and recruit additional IDVAs (specialist advisers).

There has also been a substantial increase in the number of professionals seeking advice on how to support families experiencing domestic abuse. Calls to the

Professionals' Helpline increased from 1-2 per week to 60 per week during the Spring lockdown. This was largely from professionals supporting families with children. Temporary additional funding was allocated by the Safer Devon Partnership to enable the creation of a professional consultation team to provide training for teams and individual case consultations.

Two thirds of cases receiving specialist domestic abuse support include children. The needs of children as witnesses and victims of domestic abuse are being addressed in a number of ways. The Operation Encompass initiative – that alerts a child's school the morning after the child was present at a police-attended domestic abuse incident – has seen a 38% annual increase in the number of calls to schools – over 500 calls per month on average. The initiative enables schools to provide appropriate support for children at the earliest possible opportunity, dependent upon the needs and wishes of the child.

The Council has allocated £150k of COVID-19 emergency funding to strengthen the ability of the multi-agency Early Help locality teams to provide direct support to families experiencing domestic abuse where appropriate. Additional funds have also been allocated to enable locality teams to commission support for children and families to recover from the impact of abuse. This includes Pattern Changing, Parent-Child Recovery and counselling for young people. The funding is for a fixed term, pending evaluation of impact in April 2021.

The associations between intimate partner violence and child abuse are now well known. Significant attention is given to breaking cycles of abuse and our services are careful to not overlook the needs of children when much of the focus is on the needs of the parents. Our Early help and statutory children services practice a child centred approach. Children are listened to so that their perspectives and experiences are understood because we know that their experiences living with domestic abuse differ, and whilst all children need to be safe, their need for support and help varies. Our involvement ranges from child centred preventative planning, child focused protection planning, and alternative permanency planning where concerted efforts are made to move children to extended family members or connected people (where it's safe to do so) so that their strong sense of identity is maintained.

Several initiatives are under way to prevent domestic abuse by identifying and intervening early, and reducing repeat victimisation and perpetration. Behaviour Change advisers working within the Integrated Offender Management programme have achieved very positive results. The approach helps perpetrators to recognise the impact of their behaviour, take responsibility for it and change it. A pilot in the Exeter area showed a dramatic reduction in repeat incidents of abuse. The programme has been extended to North and South Devon. The Behaviour Change approach is also being trialled with young people who show harmful behaviour in their relationships. Again, this initiative relies on fixed term funding.

The Office of the Police and Crime Commissioner (OPCC) for Devon and Cornwall has recently been allocated over £400k by the Ministry of Justice to support a range of initiatives to reduce or prevent perpetration of domestic abuse. In Devon, the "Active Bystander Communities" initiative developed by Exeter University will be embedded by creating a group of trainers who can cascade the approach to local

organisations and communities. The Active Bystander approach gives members of the community confidence and techniques to speak up and challenge attitudes and behaviours that lead to domestic abuse.

Devon's Vision for Ending Domestic and Sexual Violence abuse includes a clear focus on increasing the ability of front line professionals across the public sector to identify and respond to signs of abuse: "making domestic abuse everyone's business". Devon is testing and evaluating the innovative CRAFT framework for identifying, assessing and working with relationship conflict, violence and abuse. CRAFT builds skills and confidence of practitioners who are already supporting other family needs including Children's Centres, Family Intervention Team and Together Drug and Alcohol Service. This work is also being extended to the Perinatal Mental Health Team. The CRAFT programme is benefiting from additional (but still fixed term) funding from the OPCC/Ministry of Justice.

Victims of domestic abuse are often frequent users of health services, which opens valuable opportunities to identify abuse and offer support. Devon has been trialling the nationally-recognised IRIS approach, which embeds skills and capacity in GP practices to identify domestic and sexual abuse experienced by patients and offer support. The Devon trial covers only 30 GP practices with funding to March 2021. The Devon Clinical Commissioning Group is considering a business case for embedding the IRIS approach in all practices on a continuing basis.

The availability of safe accommodation for victims of domestic abuse and their children is affected by the severe shortage of affordable accommodation of all kinds. Devon's district councils, within their duties to prevent homelessness, can provide temporary accommodation in some situations. Fixed term government funding has enabled the creation of three dedicated Places of Safety (2-bedroom flats) and two further sites are being discussed with a local housing association. The refuge run by North Devon Against Domestic Abuse has eight rooms (25 bed places). It is also important to enable victims and their children to remain safely in their own homes where this is appropriate, excluding the perpetrator. This approach is not always possible but it can keep victims and their children close to their existing support networks, limiting trauma from separation and giving better opportunities for recovery.

There are no accepted or reliable models linking factors such as socio-economic conditions and mental health to domestic abuse. Even before the unprecedented conditions created by the pandemic and lockdown measures, it was recognised that while the role of specialist support services is important, there are many missed opportunities to recognise domestic abuse and intervene early. The testimony of victims that underpinned the creation of Devon's Vision highlighted that real change for them is often dependent on the person experiencing violence and abuse having the opportunity to develop a positive and long-term relationship with one trusted professional who can navigate the system on his/her behalf. This support can come from anyone; a children's centre worker, a teacher or an employer.

At the moment, the Council has no specific statutory duty in the area of domestic abuse support services. The Domestic Abuse Bill currently before Parliament will introduce a new duty on the Council to provide domestic abuse support for victims and their children who are living in safe accommodation. To carry out this duty, the

Council will be carrying out a needs assessment, cooperating with district councils and creating a new Local Domestic Abuse Partnership Board, leading to the creation and delivery of a strategy to provide that support. The duty will bring welcome new recurrent funding from government for those specific types of support. However it should be noted that most victims of domestic abuse seek and receive support when they are living in their communities. The broad range of initiatives listed above in prevention, action on perpetration, early intervention and recovery all take place within communities and have been made possible in Devon only through fixed term funding from a variety of local and national sources. Continuing to provide such services on a sustainable basis is a challenge to all members of the Safer Devon Partnership.

3. Support for Vulnerable Children and Families in Devon

Throughout the COVID-19 response the Council has worked and provided significant investment in alleviating the impacts of financial hardship on the most vulnerable and particularly on children and families.

The Council welcomes the announcements in November from Government to provide funding for the Winter Grant Fund of £170M, which equates to an allocation of up to £2.042M for DCC. This announcement also included increased funding from April 2021 to the Holiday Activities and Food Programme (£220M) and an uplift in Early Start Vouchers to £4.25.

The Winter Grant fund is targeted to support 'vulnerable families with children and other vulnerable households, particularly affected by the pandemic' and whilst there is some flexibility within the funding, 80% of any allocation must be spent on food with the remainder of funding available to support household costs relating to energy (heating, cooking, lighting), water bills (including sewerage) and other essentials. Any funds must be spent by the end of March 2021.

The Council, as with much of its decisions around grant allocation, is seeking not only to develop a comprehensive and timely response, but also as far as possible to create sustainability and some legacy from this funding and as a result will be decided on three key areas of investment.

Firstly, alongside Team Devon colleagues, we will align funding and arrangements with the Council's previous £1.7M investment in hardship funding to District Councils to provide vital support to families impacted by economic pressures. The Council recognises these vital 'front doors' for local people to access this hardship support alongside support and advice around housing, benefits and debt. The Council will work to ensure support regarding bills and debt relating to energy and water is channelled through District helplines and in turn with the range of support organisations locally and nationally.

Secondly, the Council has commissioned Devon Community Foundation to facilitate a rapid piece of work to develop a series of Food Networks across Devon, with an ambition to develop or align to, at least one network per District area, before Christmas.

Networks, which will include community kitchens, foodbanks, charities, cafes and pubs will initially be tasked to facilitate a food response from now until Easter 2021. This will be through a single point of contact/lead organisation in each District to support the co-ordination of food response, particularly to vulnerable families with children, at this time. This work will be supported by funding of up to £400k to provide vital funding for organisations providing food to those in need.

In the longer term it is hoped that these networks will continue to develop and sustain in order to support the Council in its wider ambitions around food, particularly in relation to sustainability, local production, good nutrition and health, and food security. In addition, these networks should provide better co-ordination for future food response requirements, for example with any wider COVID-19 or economic pressures in the coming months or in response to emergency needs.

We have seen throughout this year an overwhelming response from communities and voluntary and community sector organisations and an investment in these emerging networks and the great organisations within them, will provide timely and much needed funding and co-ordination.

Thirdly, the Council is committed to providing a universal offer to those families currently relying on term time food within schools. Therefore, we will make available a voucher for each of the 15,000 children eligible and accessing free school meals across Devon. This will equate to an allocation of £30 per child over the Christmas holidays. We will extend this offer to YP within tertiary colleges across Devon and to those eligible children within grant-maintained pre-school settings.

Vouchers, which in the main will be made available digitally to parents, will be able to be converted to spend within major supermarkets of their choice including Tesco; Morrisons; Sainsburys; ASDA; M&S; Waitrose. Arrangements will be in place for those parents without e-mail or unable to utilise the vouchers digitally.

Food networks will be developing some facilities for families to exchange supermarket vouchers, for example with a local foodbank, should the choice and access for supermarkets not meet any urgent need. In addition, the Council will provide a basic food box facility should families be unable to utilise a voucher and require urgent support.

In addition to the direct and universal issuing of vouchers, the Council will make a significant number of vouchers or equivalent, available to Early Help Teams, Children's Centres, Food Networks and District Councils to ensure that vulnerable families, who may fall outside eligibility for free school meals, are also supported over the coming weeks.

Members will recognise that this significant response, is also a significant logistical undertaking, which has been rapidly brought together following government announcements. Arrangements remain fluid though I would hope that vouchers will be delivered to most parents by 11 December.

4. Covid-19 Developments

Background

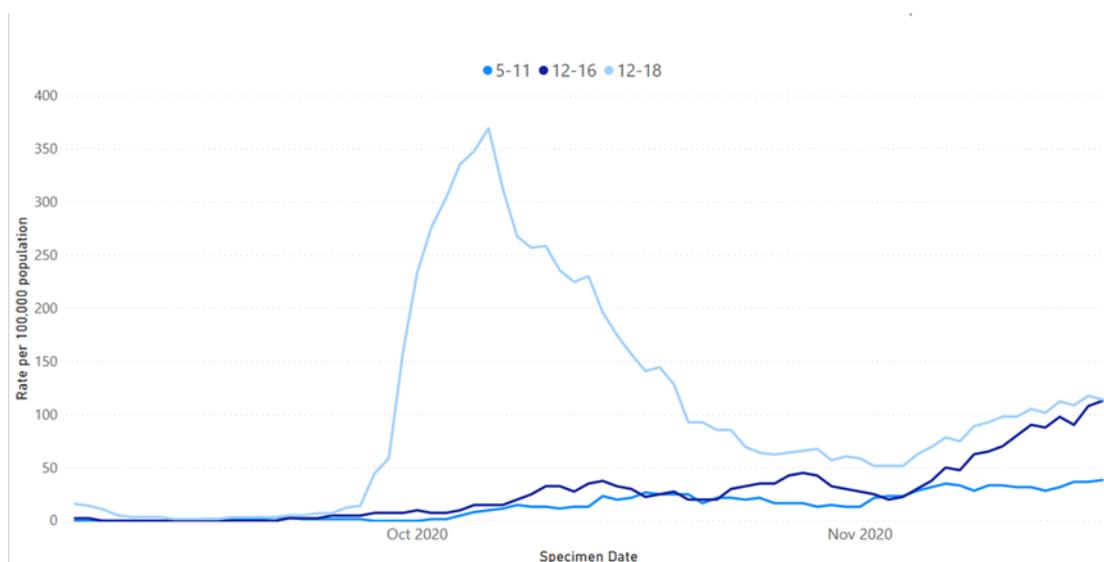
Covid 19 rates across Devon have increased steadily since October 2020. Recent data for Devon shows some early signs of overall rates reducing. The reduction in cases is also reflected nationally and is as a result of the national lockdown restrictions. To date, rates across Devon have been below the national average with the exception of Exeter which was due to an outbreak within the University in October. This was brought under control swiftly through coordinated efforts from stakeholders such as PHE, Public Health Devon, University, Police and Exeter City Council. Latest data published on the 23rd November suggest that the rate of COVID infections for Devon and England is 110.5 and 251.5 respectively per 100,000 population. While growth has been observed in most age groups, rates across Devon are currently highest in the 20 to 39 age group. These increases are mainly due to increases in the numbers of cases observed within workplaces and educational settings.

Care Homes

To date, we have 91 known situations in care homes across Devon which equate to around 180 confirmed cases. These situations are being managed through Adult Social Care with support from Public Health Devon and PHE. Situations in care homes remain open for 28 before they are closed provided no new cases are reported. Around two thirds of our care homes with open situations have not reported a case within the last 7 days. Devon has the fourth lowest Care Home rate among local authorities in the South West. Latest data suggests that Devon has a Care Home rate of 299 per 100,000 Care Home beds a rate below the South West average (708 per 100,000 Care Home Beds).

COVID 19 Pupils of statutory School age update.

Weekly rate of positive cases in school aged children in Devon



Numbers of positive COVID cases in pupils of secondary school age have risen steadily since start October with a dip seen around half term and a sharper rise seen in recent weeks. We are seeing encouraging signs that this may now be stabilising.

Rates of infections in primary school aged pupils has remained steady at a relatively low rate of 38.49 per 100,000 for past few weeks having seen a rise in early November.

The peak seen in the 12-18 age band of 370 per 100,000 was driven by cases in the university population in Exeter seen in late September early Oct when students returned.

This trend in Devon mirrors that seen nationally in school aged children but we are seeing a rise in cases a few weeks behind other parts of the country. Rates remain relatively low (113/114 per 100,000) compared to other areas of the country. Devon continues to have a higher percentage of pupils attending school than the national figures across all categories, 10% higher than the national average for secondary schools.

In the past few weeks there have been some changes made to the way support is offered to schools by the Department for Education Helpline and the Public Health England Health Protection Team (PHE SW HPT). Public Health Devon are working closely with PHE SW and in collaboration with the DCC Education team to ensure schools in Devon are receiving the support they need to make the decisions required of them in a timely manner.

Attendance local figures are for 23rd November, National are latest available of 19th November

Devon continues to have a higher percentage of pupils attending school than the national figures across all categories. 10% higher than the national average for secondary schools.

- Devon 90.1 % of pupils attending (Nationally 83%).
- Students with an Educational Health Care Plan: Devon rate 87% (Nationally 77%)
- Pupils with social workers attendance rate: 88% (Nationally 77%)
- Primary Schools: Devon rate 96% (Nationally 87%)
- Secondary Schools: Devon rate 89% (Nationally 78%)
- Special schools: Devon rate 90% (Nationally 69% approximately)
- Early years: 84.8% of those expected (No direct national comparator but estimated at 90%)

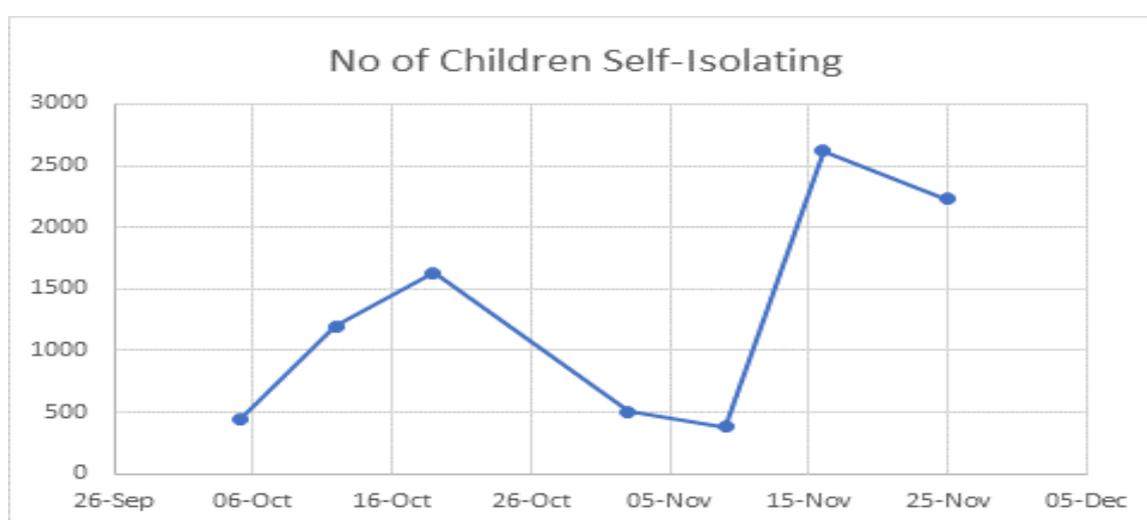
COVID 19 positive cases in school aged children for 23rd November

- **54 schools (17 Secondary, 37 primary)** currently have positive cases where staff, pupils, year groups or bubbles are self-isolating.
- On the 25th November there were approximately **2231 (1251 secondary; 980 primary)** pupil absences, due to positive COVID 19 cases, in Devon.

[88 pupils as positive COVID 19 cases, 2143 self-isolating as a close contact of a positive case]

- **472 teachers** were unable to attend on the 24th November for COVID related reasons.

Number of children of school age self -isolating in Devon



Testing

Testing capacity for people with COVID-19 symptoms (Pillar 2) has increased in Devon over recent weeks with tests in Devon having doubled compared to August levels with approximately 16,500 Pillar 2 tests being undertaken on a weekly basis in Devon.

Positivity rates, or the proportion of Covid-19 tests that yield a positive result are currently 5% for the South West and 10% for England.

Some testing of asymptomatic people has also commenced in Devon. Regular Lateral Flow Device (LFD) testing has commenced in the acute trusts within Devon and a care home visitor testing pilot has commenced in a small number of care homes. Exeter University are also offering Lateral Flow Device testing for students wishing to return home for Christmas.

There will be a national mass testing programme which will see a central supply of LFD tests to various settings to enable the undertaking of regular testing of staff. A number of pilots are underway but is likely to include settings including, visiting professionals to care homes, all visitors to care homes, prisons, extra care and

supported living. In addition to the national programme all Directors of Public Health will receive an allocation of LFD tests for local determination. Work is currently underway to identify priority groups which are not included within the national programme for which we can utilise the flexible allocation.

Mass vaccination

The government has signed agreements with seven separate vaccine developers. At present there are reported positive research results from several vaccine providers which are at various stages of the licencing process. These include

- Pfizer/BioNTech (40 million doses)
- Moderna (5million doses)
- Oxford/AstraZeneca (100 million doses)

Detailed planning is underway in Devon for COVID-19 Mass Vaccination so a local vaccination programme can commence as soon as the vaccines are authorised for us. The planning builds on national and local expertise and track record in immunisation programmes, to ensure a COVID-19 vaccine does not impact on local vital services. Local Authority representatives are closely involved, including from public health, adult social care and emergency planning.

Though we do not yet know which candidate vaccines will be approved first, or when, we expect roll out to focus in the first instance on frontline health and social care staff, care home residents and staff, and people aged over 80 in line with the current recommendations from the Joint Commission for Vaccination and Immunisation.

Two Mass Vaccination site have been identified by the CCG in addition to more local primary care network sites all of which will be supplemented by the delivery of vaccines in vulnerable settings by local primary care teams. DCC is in active in discussions to ensure that our health and social care staff can be vaccinated.

There is a comprehensive workforce plan to ensure sufficient staff can safely support the programme, and not negatively impact other services. We expect existing vaccinators, newly recruited and trained personnel, and volunteers to all have a role to play.

Tier System

The announcement on the 26th November placed Devon County Council in Tier 2 (high). Government ministers make the decision on which tier local authorities are placed in based on the following criteria:

- case detection rate (in all age groups and, in particular, among the over 60s)
- how quickly case rates are rising or falling
- positivity in the general population
- pressure on the NHS – including current and projected (3 to 4 weeks out) NHS capacity – including admissions, general/acute/ICU bed occupancy, staff absences

- local context and exceptional circumstances such as a local but contained outbreak

Reviews of the tiering allocation will take place every 14 days.

Christmas

The Government has confirmed the Christmas coronavirus restrictions between 23rd and 27th December. This will allow three households to form a Christmas bubble.

5. Improving local bus services

The National Audit Office (NAO) report of October 2020 examines the effectiveness of the Government's support for buses, and the extent to which the enablers are in place for local authorities and operators to realise the long-term, sustained improvement that the Department for Transport (DfT) now intends.

The report:

- explains what the data shows on bus use, provision and performance over time and across local authorities in England. It also sets out roles, responsibilities and accountabilities for delivering and improving bus services;
- examines the effectiveness of the revenue funding framework for buses;
- examines the effectiveness of government's current approach to improving bus services; and
- assesses the issues government needs to address to achieve its aims for the future of buses in England.

The report does not examine the value for money of the DfT's emergency COVID-19 interventions. Although the issues highlighted pre-date the COVID-19 pandemic, the NAO considers that they remain and have been brought into sharper relief by its effects. It does not examine voluntary and community transport providers.

Bus services have been declining across England for 70 years and the decline continued following deregulation in 1986, with only a few local authorities managing to buck the trend. However, government recognises that affordable bus services have public value, and funds around 24% of bus operators' revenue income. They have chosen to deliver public bus services via a deregulated market model, and devolves decisions about supporting services to local authorities, who best understand local needs.

The DfT is not accountable for delivering bus services, but it has national policy responsibility. It is preparing to commit significant new funding to bus services and to lead a national strategy for improvement against a background of considerable uncertainty. The DfT collects data on buses and can show it has funded valuable improvements, but to date it has not sought to demonstrate how its actions have contributed to supporting optimal value for money across the bus system. If it is to work with and through others at central and local level, make informed choices about funding, and be able to adjust its plans to ensure it meets its objectives, it will need greater clarity on what it wants to achieve and how it will know when it has done so.

During the COVID-19 pandemic, the DfT has come together with local authorities and operators, intervening rapidly to target the weakest areas and keep buses running, which offers learning for the future.

The report goes on to make a number of recommendations:

1. **a clear, consistent vision of the future of bus travel**, that encourages and supports local authorities to make long-term plans for their own local needs.
2. **a detailed, transparent delivery plan with clear objectives, responsibilities and accountabilities for the DfT and others.**
3. **good quality data and measures of success.**
4. **an active role in supporting local authorities to access evidence and experience to support improvement.** The DfT should work with MHCLG, local government, transport planning professional groups and operators to make it easy for local transport planners to share experience, resources, evidence and advice, and where necessary build local capacity to influence and improve bus services;
5. **the amount and form of funding, for both local authorities and operators, that is necessary to achieve the objectives of the bus strategy.**

For Devon there are no immediate implications and we await details of the Government's strategy for buses together with any long-term funding intentions, now due early in the New Year. Our minds are currently focussed on efforts to sustain the bus network during and in the immediate aftermath of the COVID pandemic.

Until recently, Devon was one of the authority areas bucking the trend of decline in bus patronage. In 2019/2020 we were recording a 28% growth since 2002/2003.

We attribute this to successful joint, informal partnership working with our major commercial bus company (Stagecoach) as well as other small operators. In spite of previous pressure on finances, the County Council support for local bus services has continued to maintain good geographical coverage and using developer funding to bring about significant improvements. Our achievements include:

- successfully kick-started service developments to achieve either commercial viability or sustainability within reasonable support levels.
- all bus services are now low-floor accessible.
- we have supported all our companies to acquire contactless payment facilities.
- we maintain a supply of public information both on-line and (until interrupted by the pandemic) through traditional printed material which continues to be well received.

We support the report's fifth recommendation on funding. It states that the DfT has already committed to providing a long-term funding model and that it should work with MHCLG, HM Treasury and local government as part of wider local government funding discussions, to ensure that the various elements of bus funding available to combine effectively to support the objectives set out in the strategy. This should include:

- reform of the Bus Service Operators Grant (BSOG) to ensure incentives are aligned with government's objectives;

- and work to understand the actual costs to local authorities of funding statutory concessions and the effect on budgets for bus improvement.

On BSOG, Devon has successfully utilized and profiled the expenditure of its devolved funding for tendered services to maintain stability and consistency of provision. We would favour devolvement of at least a proportion of commercial service BSOG and have conveyed this view to Government.

Regarding the funding of statutory concessionary travel, we have consistently pointed out the serious shortfall in funding. The Government states concessionary travel funding as support for the bus industry rather than what it is; a subsidy for the eligible passenger travelling and not paying a fare.

Before the pandemic, we were about to embark on improvements to the bus network, utilizing new government revenue funding, and ran a positive and encouraging public consultation. The pandemic has put those plans on hold and the bus network is now confronting potential long-term and permanent changes to travel patterns arising from altered working arrangements and shopping habits, a slow recovery in public confidence and the general effects of economic downturn. The Devon network is strong and well run but it is unlikely to emerge without changes and in this context the support from Government needs to be as clear, consistent and long-term as the NAO report advocates.

Councillor Roger Croad

Cabinet Member for Community, Public Health, Transportation and Environmental Services