

QUESTIONS FROM MEMBERS OF THE COUNCIL
Wednesday 14 April 2021

1. QUESTION FROM COUNCILLOR CONNETT
Re: Healthy Start Scheme Awareness

Is Devon County Council aware of the Healthy Start scheme which provides vouchers for eligible families to receive fresh fruit, vegetables and milk and that around 55 in every 100 eligible Devon residents are not claiming the help they are entitled to?

REPLY BY COUNCILLOR CROAD

Devon County Council's Public Health team has actively worked to promote the Healthy Start scheme for many years in collaboration with colleagues from Public Health Nursing, Children's Centres, and Midwifery amongst others. In addition to the vouchers provided for food, Healthy Start also provides vitamins to pregnant and breastfeeding mothers and infants, of which it is the statutory responsibility of the local authority to provide.

The low number of families in receipt of Healthy Start vouchers and vitamins compared to the number eligible is a persistent problem experienced nationally. The average uptakes nationally and for the South West region are 52.5% and 50.9% respectively, with regional averages ranging from 47.5% to 60.5%. Despite the take up across Devon districts averaging 46%, this has remained relatively constant over time with all districts' uptake rates remaining stable or increasing in the 6-month period from August 2020 to January 2021. There are numerous well documented barriers to accessing Healthy Start which contribute to the low rates. These include:

- The application which requires completion of a complicated paper form, possibly creating barriers with language, literacy, and accessibility. Additionally, with healthcare appointments becoming virtual throughout the pandemic and the closure of many public services including libraries and children's centres, it has been difficult for families to access copies of the form to apply. Without being provided with a paper form, the use of a computer and printer is also required, along with IT skills.
- The requirement for a nurse, GP, or midwife to sign the application form was only removed in April 2020, as a result of the pandemic. This requirement was not to approve the application or validate eligibility, but rather to confirm pregnancy and that advice had been given. This was a significant barrier due to the time pressures in appointments and healthcare professionals' awareness of why they needed to provide their signature.

- A lack of continuity in vouchers between pregnancy and birth meaning families are required to call the Healthy Start Issuing Unit after birth to ensure their entitlement continues. This creates barriers as many families do not know this is a requirement and there is currently no freephone number.

The pandemic has brought additional challenges to the uptake of Healthy Start. The Council has adapted its service and provided funding to Children's Centres so that they have been able to post vitamins to eligible families due to children's centre closures.

The Healthy Start scheme is currently undergoing digitisation, and this new scheme is scheduled to be live nationwide by autumn 2021. The new scheme removes some barriers to sign up, including replacement of the paper form with a simple online version which gives an immediate answer whether beneficiaries application is successful, and provision of a phone service to assist with form completion if needed. There will also no longer be the need for a healthcare professional approval signature.

Other changes coming through the digitisation include:

- Rebranding using the NHS brand which is trusted and recognisable
- Provision of a chip and PIN card with monetary value pre-loaded and topped up as necessary
- A change in how retailers accept vouchers (see question 3 response)
- Increased flexibility on vitamin distribution methods

2. QUESTION FROM COUNCILLOR CONNETT

Re: Healthy Start Scheme Promotion

Will the County Council urgently run a promotion through its Public Health service encouraging more take up of the Healthy Start scheme.

REPLY BY COUNCILLOR CROAD

Through various channels, the Council has been promoting the Healthy Start scheme for many years. As detailed above there are significant changes currently occurring to the Healthy Start scheme. The Public Health team are in regular attendance at national meetings and showcases in order to remain informed of the changes. In line with the national updates due by autumn, the DCC Public Health team are reviewing promotion of Healthy Start and developing an action plan with multi-agency partners on how to increase uptake across the county and raise system wide awareness of the scheme, including developing a communications plan for the new scheme. We are also reviewing the process for vitamin distribution to ensure access is as easy as possible for those families eligible.

As the scheme is in a process of change there is inconsistency between the old Healthy Start and new NHS brand and there are currently no

communications/media assets with the new NHS branding available for use by local areas. We are therefore not able to undertake promotion of the new scheme before its national launch.

DCC Public Health has undertaken promotion of the programme during the pandemic to partners, including information to Public Health Nursing, Housing providers, Midwifery, Children's Centres, Local Food Networks, as well as through the [Devon Children and Families Partnership webpages](#), [Free School Meals DCC webpages](#), [DCC Education and Families Early Years newsletter and webpages](#), [Connect Me Children and Families Bulletin](#), [DCC Facebook pages](#) and social media feeds and information on [COVID-19 information for families pages](#). Information flyers and application forms were also sent to all Food Banks in Devon, and they were encouraged to share information with local families using Food Banks.

Whilst awaiting digitisation the Council's Public Health is able to further promote the current programme to healthcare professionals and other colleagues, re-emphasising the importance of the scheme, what eligible families could receive, how many families are currently missing out, and the importance of taking opportunities to signpost to the scheme when they arise. Once the new scheme is digitised, unfortunately there will be no integration between the old and new systems, meaning beneficiaries will need to re-apply rather than automatically migrating to the new digital system. We will need to work to promote awareness of this issue to ensure that those currently receiving Healthy Start can be supported to apply for the new programme.

The Public Health team have recently piloted an initiative called The Goodie Box using the COVID-19 Winter Grant. This project, running alongside the Holiday Activities Programme, delivered recipe kits and the food required to make them directly to families. This initiative was specifically targeted at families with children aged 0-5 and included recipes with many ingredients that can be purchased with Healthy Start vouchers. The opportunity was also taken to signpost to the scheme in The Goodie Box booklets and supporting follow up information.

3. QUESTION FROM COUNCILLOR CONNETT

Re: Healthy Start Scheme and Supporting the Economy

Is the Council aware that if all eligible families took up the support, it could generate an additional £500,000 spent in our local shops on fresh fruit, vegetables and milk with the added benefit of supporting local businesses and helping to sustain jobs?

REPLY BY COUNCILLOR CROAD

Currently for retailers to accept vouchers and receive the business they must sign up to the national Healthy Start programme. They then must collate the paper vouchers and submit them in a quarterly return for reimbursement.

Research nationally has shown that many retailers choose not to accept Healthy Start vouchers because of this bureaucratic process, and due to other concerns with accepting voucher copies, storing used vouchers, and delays in reimbursement.

The new digitised scheme will mean that retailers no longer need to sign up to accept Healthy Start vouchers and beneficiaries can utilise their entitlement at any retail premises with chip and PIN facility that is coded as selling the appropriate products (vegetables, fruit, pulses, milk, formula). Not only will this reduce barriers to access for beneficiaries but will also make it easier for retailers to be part of the scheme.

4. QUESTION FROM COUNCILLOR CONNETT

Re: Freeports and the potential impact on neighbouring areas

What was the appraisal on the impact to neighbouring districts of the Devon freeport bid when it was submitted.

REPLY BY COUNCILLOR GILBERT

There was no requirement in the bidding prospectus to carry out an appraisal of the impact outside the Freeport Outer Boundary. The prospectus set a limit for this boundary of a maximum distance of 45km and it has been set to be contiguous with the Plymouth and South Devon Joint Local Plan covering Plymouth, South Hams and West Devon. This offered the advantage of a single planning framework which covers the three employment sites proposed as Custom and Tax zones – Oceansgate, Langage and Sherford.

The next stages of developing the Freeport include producing an Outline and Full Business case with a target date of September to complete the Full Business Case. A programme of stakeholder engagement will be undertaken over the coming months as part of this process. In broad terms it is expected that the Plymouth and South Devon Freezone will have a positive impact on the economy of this wider sub region creating 9,000 jobs.

As the outline and full business cases develop, further information will be available on the policies to be put in place to attract new and international investment with a focus on key sectors, such as Marine, Engineering and Defence, along with displacement control measures.

The Freeport policy is focused on attracting new and overseas investment and not to 'steal' or displace from elsewhere in the region. Learning from the approaches taken at the Exeter and East Devon Enterprise Zone will be helpful to support this.

5. QUESTION FROM COUNCILLOR CONNETT

Re: Effectiveness of the Enterprise Zone

How effective has the Enterprise Zone been, as that is a similar principle to Freeports.

REPLY BY COUNCILLOR GILBERT

The Exeter & East Devon Enterprise Zone was announced in the 2015 Autumn Statement as part of the Heart of the South West Enterprise Zone package. It consists of 4 designated sites – Exeter Science Park, Skypark, Airpark and Cranbrook Town Centre.

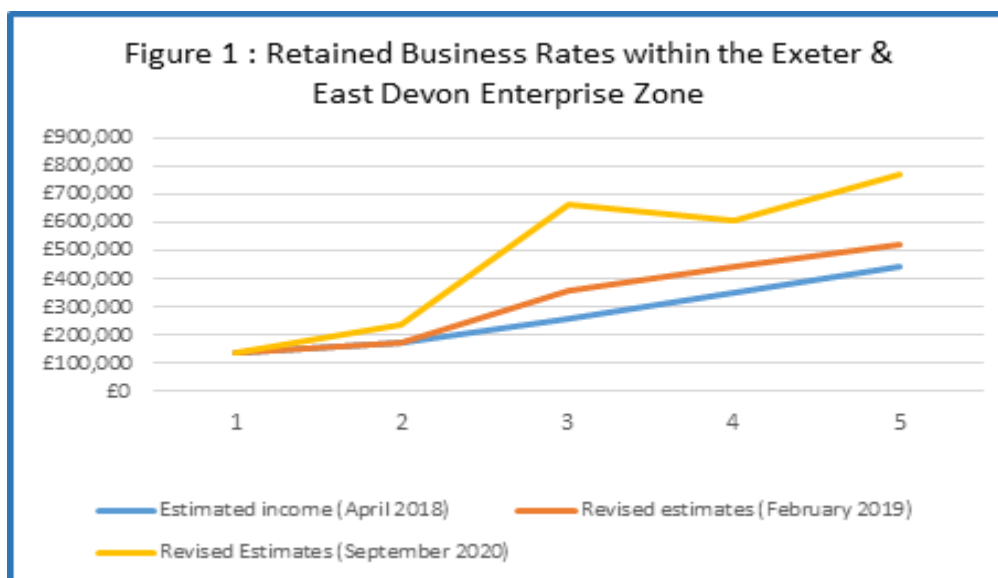
The aim of an Enterprise Zone is to stimulate business growth in designated areas by providing financial incentives and simplified planning arrangements to businesses and to Councils. The aim is that they will drive local and national economic growth and create jobs.

The Exeter and East Devon Enterprise Zone has been very effective at acting as a catalyst to investment from the private and public sectors. The key power of the Enterprise Zone designation, which is shared with the Freeport, is the ability to borrow against ring-fenced uplift in business rate income, which can then be used to invest in the timely delivery of infrastructure.

As some examples below indicate, the Enterprise Zone investment benefits the wider area, not just the 4 designated sites.

In the case of the Exeter and East Devon Enterprise Zone the trajectory of site occupation and hence business rate income has exceeded original expectations and the incentives on offer, such as Business Rates Relief for eligible businesses has encouraged some eligible occupiers on to sites, such as at Skypark and Science Park.

The chart below, taken from a Business Plan update presentation clearly shows the forecast improvements in business rates generation as the Exeter and East Devon Enterprise Zone has developed.



The ability to forward fund infrastructure, such as Long Lane, allows sites to come forward more quickly. It also provides benefits to other sites and the wider area. In the case of Long Lane, improving access and bus services to the Future Skills Academy and Exeter Airport and the Airport Business Park as well as opening up the Airpark site. The Enterprise Zone has also part-funded the Ada Lovelace Building at Science Park, enabling that to come forward more quickly.

Among other schemes, bus subsidies have been provided to enable the 56 service from Exeter St Davids to Exmouth via the Enterprise Zone sites to be increased in frequency and over extended times. This benefits the wider area, including adjacent logistics sites and the airport, supporting job growth and commuting across the area. Likewise, the Park and Change site adjacent to Exeter Science Park will also benefit the wider area including reducing car travel into Exeter.

The Plymouth Oceansgate Enterprise Zone in South Yard is embedded in the Freezone bid and its success in establishing an international reputation for marine innovation is key to the targeting of businesses in this sector to come into the Freezone.

6. QUESTION FROM COUNCILLOR CONNETT
Re: 'Gateway' Policy and Freeports

Is there planned to be a 'gateway' policy that precludes existing local businesses relocating and benefitting from the Freeport, as exists with the Enterprise Zone, for example.

REPLY BY COUNCILLOR GILBERT

An outline and full business case are being developed, in consultation with Government as part of the next stages of development for the Plymouth and South Devon Freezone. Included within this work will be the development of a Gateway Policy for the designation with evidence of how displacement control measures will be implemented. Complementing this will also be the development of an international marketing approach to attract new investment.

Businesses from the UK seeking to have operations in any Freeport will need to clearly show how this new operation represents incremental investment and employment to existing operations. Local businesses will not be precluded from applying to locate within the Plymouth and South Devon Freezone but will need to show significant uplift in new economic activity and growth. The aim behind the designation is to attract new international businesses to the region with a focus on marine innovation, engineering and defence capabilities. This is likely to generate supply chain opportunities across the wider peninsula,

benefitting businesses within the region not only within the three proposed tax and custom sites at Oceansgate, Sherford and Langage.

In the case of the Enterprise Zone, there is a Business Rates Relief Policy which identifies the circumstances in which occupiers of premises within the Exeter & East Devon Enterprise Zone will be eligible for business rate relief within non-domestic properties located within the Enterprise Zone.

Businesses that occupy property in the Enterprise Zone may be eligible for a discretionary relief of up to 100% of the business rates payable, subject to meeting the criteria set out within the policy and subject to State Aid De Minimis allowance, now known as Subsidy Control De Minimis. This policy includes a gateway restriction for businesses relocating from elsewhere in Devon as follows:

“If the business was previously located elsewhere within the Devon County Council area and is a relocation for purposes of growth/expansion, evidence is to be provided to prove that no appropriate expansion space was available at the previous site.”

In addition there is a Research and Development (R&D) specific Gateway policy for the Exeter Science Park site, so businesses coming on to this site need to meet the criteria around R&D before eligibility for business rate relief can be considered.

**7. QUESTION FROM COUNCILLOR CONNETT
Re: Fire Door Assessment and Replacement**

Devon County Council engaged consultants to survey and assess 1,991 fire doors to see if they required remediation or replacement.

It was confirmed that approximately 400 fire doors needed to be replaced or needed some remediation works to comply with the TRADA standard.

The average cost per door is £1,250 with the work to be completed by 31 March 2021.

Was the work completed on time and within the £500,000 budget?

REPLY BY COUNCILLOR HART

The fire door remediation or replacement work carried out through the Council's contractor framework is substantially complete with the cost coming within the £500,000 budget figure.

A further review of the fire doors reduced the number to be worked on or replaced to 258, therefore the costs are now estimated at £306k with £253k spent so far. There has been a delay in finishing these works because of the latest lockdown due to a delay in supplies and available contractors in early new year. In addition, a number of premises requested that contractor access was reduced due to COVID safety measures. However, these sites have now been scheduled for when the lockdown restrictions ease.

It is difficult to put an average cost per door as some doors needed far more work than others and others needed total replacement, meaning there could be quite a variation.

8. QUESTION FROM COUNCILLOR HANNAFORD
Re: Women's Mental Health Hubs

Can I please request the relevant cabinet member brief cabinet on the recent announcement that Devon will get one of the new women's mental health hubs.

REPLY BY COUNCILLOR CROAD

The development of additional perinatal mental health support within maternity units is excellent news for families in Devon. It is a welcome addition to existing universal and specialist mental health support for new parents as part of the NHS Long Term Plan. Devon is an early adopter of this national initiative which went live in January 2021 and will specifically provide psychological intervention for parents experiencing baby loss, birth trauma and birth phobia.

Public health nursing services, provided by the Local Authority, already work collaboratively with specialist services as part of an integrated perinatal and infant mental health care pathway and look forward to further developing links with this new service. The press release, attached as an appendix, provides further details regarding the service and a case study from Devon.

9. QUESTION FROM COUNCILLOR HANNAFORD
Re: National Park Authorities and Proposals to Merge

Can the relevant cabinet member please brief cabinet on the Government's proposals to merge all the National Park Authorities.

Including what representations we have made as part of national consultation process.

REPLY BY COUNCILLOR CROAD

At present, there is no government proposal to merge all National Park Authorities.

There has been recent media coverage of a leaked report which referred to the consideration being given by Defra to the possible role and structure of a new National Landscape Service. The establishment of this sort of service was one of the recommendations made through the Landscapes Review which was led by Julian Glover at the request of the (then) Secretary of State for the Environment, the Final Report of which was published in September 2019. This addressed a very wide range of issues relating to both National Parks and Areas of Outstanding Natural Beauty (AONB), including specific recommendations relating to their governance. Devon County Council submitted evidence at the time of the Review and met directly with one of its panel members.

The government response to this Landscapes Review is keenly anticipated. Whilst assumed that the creation of a National Landscape Service is likely to be announced, there is no certainty about its role and composition and the corresponding implications for the governance of our National Parks and AONBs.

New Dedicated Mental Health Services for New, Expectant and Bereaved Mums

Thousands of new, expectant or bereaved mothers will receive help and support for mental health problems through dozens of new dedicated hubs which are being set up across the country.

The 26 new hubs will bring together maternity services, reproductive health and psychological therapy under one roof as part of the NHS Long Term Plan.

Around 6,000 women will receive care and treatment for a wide range of mental health issues from post-traumatic stress disorder (PTSD) after giving birth to others with a severe fear of childbirth.

NHS England chief executive Simon Stevens said: “The pregnancy and the birth of a new child are a special time for families but if things go wrong it can have a huge impact on women, their partners and even other children.

“That is why the NHS is developing maternal mental health services to help them get back on track as part of our Long Term Plan.

“NHS staff have pulled out all the stops to deal with more than 393,000 patients requiring hospital treatment for Covid-19 but we have also kept mental health services running and I am delighted that, we are now expanding help for new, expectant and bereaved mums despite the continuing pandemic.”

As well as offering psychological therapies for new and expectant mums the clinics will also provide training for maternity staff and midwives.

Ten sites will be up and running within months with the remainder opening by April 2022.

Every area will have one by April 2024 as part of the [NHS Long Term Plan](#) to increase access to psychological support for women before, during and after pregnancy.

Claire Murdoch, NHS England's national mental health director, said: "Every woman has a unique experience with pregnancy and motherhood and some will need extra support to cope with mental health issues that can range from anxiety to severe depression so I am delighted that mothers across all areas of the country will be able to access this help if they need it.

"The NHS is here for everyone who needs help and the expansion of specialist care through the roll out of these maternal mental health services will strengthen the services already in place, enabling us to improve the quality of care and outcomes for many women.

"I would encourage any mum who needs this support to come forward safe in the knowledge that her mental health and well-being are of paramount importance and she should not feel ashamed of accessing the help she needs."

It is estimated that it costs the NHS and social care sector £1.2 billion per year where women do not access high-quality perinatal mental health services.

Five years ago, 40% of the country had no access to specialist perinatal mental health care. However, specialist community perinatal mental health services are now available in each of the 44 local NHS areas and over 30,000 women were seen in specialist perinatal mental health community services in 2019/20.

Dr Giles Berrisford, NHS England's national speciality advisor for perinatal mental health, said: "We know around one in four women experiences mental health problems in pregnancy and during the 24 months after giving birth, and these maternal mental health services will provide vital support, meeting the specific needs of these women.

"Their establishment will significantly contribute to the overall commitment of the NHS to enable at least 66,000 women with moderate to severe mental health difficulties related motherhood to access specialist care by 2023/24."

Around 6,000 women are expected to receive care as part of the pilots by the end of 2021/22. The work undertaken by these sites will be vital to efforts to further scale up these services across the country.

Emily Slater, CEO of the Maternal Mental Health Alliance, said: "The Maternal Mental Health Alliance (MMHA) welcomes this positive step towards achieving ambitions for perinatal mental health laid out in the Long-Term Plan.

“For the more than 1 in 10 expectant and new mothers experiencing mental health problems, and the increased numbers as a result of the pandemic, there needs to be a system of care available to support them. These new services will enable more women than ever to access vital perinatal mental health care.

“The MMHA is keen to see training for all staff who interact with women and their families in the perinatal period, so we also welcome the role these services will play in upskilling the maternity workforce, alongside providing much-needed support.”

Background

Maternal mental health services will provide improved, targeted care to those whose needs would not be well met in other services. For example, women experiencing PTSD following perinatal loss.

NHS England and NHS Improvement launched an expressions of interest process into these services in July 2020.

Below is a list of the 10 early implementor sites and 16 fast follower sites that will develop and test the new service.

<u>Early Implementors</u>	<u>Fast Followers</u>
<p>Midlands Birmingham & Solihull Leicestershire Northamptonshire Shropshire Telford & Wrekin</p> <p>North East South Yorkshire and Bassetlaw</p> <p>North West Lancashire and South Cumbria</p> <p>South East Hampshire and Isle of Wight Kent and Medway</p> <p>South West Cornwall Devon</p>	<p>East of England Bedfordshire, Luton and Milton Keynes Norfolk and Waveney</p> <p>London North Central London North East London North West London</p> <p>South East Berkshire, Oxfordshire and Buckinghamshire Frimley Health Surrey Heartlands</p> <p>South West Bath, Swindon and Wiltshire Gloucester Somerset</p> <p>North West Greater Manchester Lancashire and South Cumbria Cheshire and Merseyside</p> <p>North East North East and North Cumbria Humber, Coast and Vale</p>

Case study:

The Maternal Mental Health Service (MMHS) in Devon aims to assess and offer treatment to women experiencing a moderate/complex, severe mental health issue directly arising from their maternity experience.

The service aims to reach a cohort of women that may previously have faced a gap in service by:

- Increasing support to the multidisciplinary team in relation to women and families who have experienced perinatal trauma
- Offering psychologically informed specialist assessment and formulation
- Further increasing links to wider psychological services
- Increased provision of evidence-based therapies
- Consultation and training to professionals

The Devon MMHS went live in January 2021. To date, 36 referrals have been made, 27 women have been assessed and ten women have started or completed treatment.

Lizzie had a miscarriage prior to her current pregnancy. This experience triggered low mood, a sense of lost safety and heightened danger, nightmares and intrusions around the miscarriage and a lack of excitement about the new baby.

In pregnancy, Lizzie was referred to the Perinatal Mental Health Team (PMHT) by her Midwife, and it was identified that an assessment under the MMHS would be appropriate.

At assessment, an Impact of Events Scale was used to identify clinical levels of PTSD. The MMHS offered up to eight sessions of Eye Movement Desensitization and Reprocessing (EMDR) therapy, a psychotherapy treatment that was originally designed to alleviate the distress associated with traumatic memories; this intervention was able to reach Lizzie's core worry that the miscarriage was her fault, and the sessions of EMDR were successful in working through this.

This freed Lizzie up to start feeling excitement towards the new baby, while continuing to remember the lost baby and not feel that she was responsible for what happened.

Through this work, all the identified symptoms of PTSD, as well as her feelings of low mood and loss of safety disappeared. Lizzie was discharged after three sessions of EMDR with significant improvement and evidence of good recovery, therefore reducing risk of negative impact in the future for her and her children.

The Clinical Psychologist in the MMHS who completed the assessment and treatment on this case said: "The MMHS gave Lizzie fast access to brief treatment which had a significant impact on her mental health, the difficulties were affecting her relationship with her unborn baby whilst also making day to day life a struggle. Brief treatment enabled the processing of loss and renewed possibility of bonding and being excited about and preparing for her new baby."

Several weeks after she had completed her treatment, and having had her baby girl Enfys, Lizzie said: "I feel unbelievably better after this

pregnancy and birth compared to how I felt after my experience with my first child when there wasn't any support available to me; even with the added distress of having a miscarriage, the pressures of Covid-19 restrictions and not being able to see my family.

“I feel happier, more confident and much better in my mental health. I feel fully recovered. The service was brilliant!”

The Maternal Mental Health pathway is integrated within the Perinatal Service, using existing structures and processes. Close collaboration with other local services, such as IAPT and hospital counselling services, is essential to ensure women receive the right support at the right time.

The MMHS is also liaising with local and national organisations targeting ethnic minority populations, such as counselling services, befriending services, support groups, and faith organisations. This allowed the team to gain a better sense of local demographics and to develop an accessible service offer (the team has designed a digital offer due to high levels of rurality and deprivation in the county) with cultural awareness training to staff.