

## Annual report for West Hill Parish Council – April 2019 to March 2020

It's been an eventful year, with another snap general election, which I participated in as an Independent candidate once again, this time gaining almost 26,000 votes.

There have been continued financial challenges for Devon County Council, as a result of continued and deepening government funding cuts and my ongoing work with Devon County Council's Health and Adult Care Scrutiny Committee and my commitment to environmental issues.

This is a snapshot of some of my work during the past year.

### East Devon care at home service is 'fully recruited'

The East Devon Care at Home Service otherwise known as 'rapid response' was described as "fully recruited", Devon County Council senior officers confirmed at the **21 March 2019** Health and Adult Care Scrutiny Committee meeting.

Councillors at the meeting, heard from senior officers that their long-standing efforts to recruit to a team that was around 17 per cent under staffed (sorry I don't have the numbers) had been successful with the assistance of agency staff.

The service has been under-staffed for a long time, which had resulted in me proposing and chairing a spotlight review into the service last year, after a GP complained.

The review found that some GPs had lost confidence in the service and Hospiscare was also having difficulty in getting carers out to dying patients to carry out basic care such as washing and dressing.

Some GPs said they were simply admitting people to hospital because of the lack of paid carers who could look after people in their own homes.

The rapid response service had received investment before the community hospital beds were closed, but witnesses told the spotlight review that their closure had put considerably more pressure on the system and Hospiscare's 12 bedded unit was now full much of the time.

Officers told councillors at the 25 March meeting that the service would need to grow so they were not complacent.

There is also a drive to reduce the use of agency staff as they are more expensive.

*NB. It's currently unclear how the staffing situation for the rapid response service stands. The vacancy rate for care workers has been high for a long time especially in Exeter and East Devon, but I understand that the coronavirus epidemic has encouraged more people to sign up to being care workers locally.*

### Fibre to home broadband delayed for an 'unknown number of months'

**In March 2019** I blogged about the delay in Devon on the implementation of fibre to the home broadband Gigaclear contract with Connecting for Devon and Somerset (CDS), partly due to the collapse of Carillion (a company linked to Gigaclear) and partly due to the enormity of the Devon operation and planning issues associated with Devon banks.

There is still a significant challenge for Connecting to Devon and Somerset in delivering fibre to home broadband in Devon, so private company, Jurassic Fibre have taken on some of this work.

### Devon County Council launches wildflower verge policy and calls for champions

**In May 2019** Devon County Council's environment team launched its long-awaited wildflower verge policy, following my work with three pilot verges in my ward of Otter Valley.

I started the pilot in late 2013 working with highways officers and Devon Wildlife Trust, to boost the numbers of insects after it became clear that populations were falling away dramatically.

It was also to offset the recent decision to not cut highways verges (except on junctions and bends) due to government budget cuts.

It has been a legal challenge to put together this guidance, due to highways and health and safety regulations but I'm delighted that the information went live on Devon County Council's website a few days ago.....

From a practical point of view, it will be necessary to check with officers on the suitability of the road verge for wildflowers, and also to get the mix right.

Additionally, people need to do a short online health and safety training exercise.

It was great news and many town and parish councils have since signed up the initiative.

## 10 Point Green Action Plan

I submitted a motion for a 10 point Green Action Plan for Devon County Council meeting on **Thursday 23 May**.

*"This council notes its resolution on declaring a climate emergency in Devon, in February. This council notes also that officers launched the policy on wildflower verges earlier this month. Huge congratulations to the officers who helped bring this about.*

*"The government has now declared a state of climate emergency across the UK, following the actions of Extinction Rebellion.*

*"Climate change and other human activity is now causing species to decline at a rate unprecedented in human history, with three-quarters of land-based environments and two-thirds of the marine environment significantly altered.*

*"Devon County Council, with its positive record on the environment is well placed to work with others to help mitigate the catastrophe coming our way.*

*"Therefore, this council agrees to:*

- 1. Call on the government to offer all pollinators full legal protection from harm*
- 2. Write to all Devon outlets stocking bee harming pesticides, and urge them to permanently cancel their order with the suppliers*
- 3. Take action to phase out all glyphosate pesticides used in council weed spraying or any other council related activity, by December 2019 (there may be exceptional circumstances such as dealing with specific non native species, such as Japanese knotweed)*
- 4. Support Devon County Council tenant farmers in phasing out the use of inorganic fertilisers (such as nitrogen) by December 2023*
- 5. Support Devon County Council tenant farmers in setting aside 10 per cent of their land for wildlife and/or wildflower mixes for pollinators*
- 6. Work with community groups and non-government organisations such as Devon Wildlife Trust and the Woodland Trust to support Devon County Council tenant farmers to set aside five per cent of their land for tree planting*
- 7. Work with community groups and non-government organisations such as Devon Wildlife Trust and the Woodland Trust on supporting town and parish councils, schools and community groups to set aside land for tree planting*
- 8. Develop a policy on soil health good practice, with an emphasis on allowing land to recover and phasing out damaging chemicals, which are ultimately sterilising the land. This would include setting appropriate and reasonable targets for Devon County Council tenant farmers*
- 9. Work with South West Water on a campaign to save water across the county, with an emphasis on education about future water scarcity. Specifically target town and parish councils, community groups and schools to raise awareness of the importance of good water practice*

*10. Support Devon Wildlife Trust's campaign by calling on the Environment Secretary to allocate a further eight Marine Conservation Zones to Devon's waters."*

### Devon's NHS failing on cancer treatment waits

In June 2019 members of Devon County Council's Health and Adult Care Scrutiny Committee heard that Devon's NHS was failing to meet national targets on people being treated for cancer within 62 days of an urgent referral.

Councillors at today's Health and Adult Care Scrutiny Committee meeting heard that part of the reason for the failure was an increase in such referrals. The target has been missed for over a year, according to the Winter Pressures Performance report examined today by the committee.

But Devon's NHS is also failing the national target on urgent referrals within two weeks of suspected cancer, with 89.5 per cent of patients being seen in the timeframe, rather than the national target of 94 per cent.

And the number of people being treated within 18 weeks of a referral is also missing the national target, which is set at 92 per cent. Devon's position, which is deteriorating, ended March this year at 80.5 per cent of all referrals being seen within the timeframe.

Waits at A&E however, were generally within the timeframe, with the RD&E doing particularly well.

With a bit of probing from me, the committee also heard that around 200 people across Devon are awaiting packages of care on any given day, to enable them to either be discharged from hospital, a care home or remain in their homes.

Some of those people will be discharged from hospital without packages of care, if family or friends are on hand to help.

The picture which is pretty much unchanged over recent years, is largely due to a lack of paid carers available – approximately 50 more are needed to make the system work, councillors heard today from officers.

This is an ongoing seemingly insurmountable problem which is causing hardship to the people needing care and those who look after them.

The recommendation printed on the report was that the report was noted.

I said I disliked a recommendation to note a report where it there were obvious failures and proposed that the committee recorded concern about the areas of concern and that a performance report was seen by the committee on a bi-annual basis. This was agreed.

## The local NHS says there's a funding shortfall so is asking people their views...

**In July 2019** the local NHS – Northern, Eastern and Western Devon Clinical Commissioning Group (NEW Devon CCG) –asked Devon residents their views on health services, after outlining in a presentation sent to councillors, information about a funding shortfall, workforce shortages, a population increase and lengthening waiting times.

They said:

- One in 10 nurse jobs and 1 in 12 social worker posts in Devon remain vacant as demand for services increase.
- There have been increases in NHS funding, but peoples' needs for services are growing faster
- Devon is struggling to provide timely access to services. In addition, a rise of conditions like cancer, heart disease and dementia will put the health and social care system under more pressure unless more flexible, joined up approaches are taken
- The county's population will rise by about 33,000 people equivalent to the population of Exmouth over the next five years
- The number of people aged over 85 in Devon will double in the next 20 years. We need to be able to offer all the services they need as an even greater priority

The CCG says it does not have all the funding it needs to deliver the 'current models of service provision.'

## My 10 Point Green Action Plan makes progress

**In October 2019** Devon County Council reported that that the Environmental Performance Board endorsed prioritising work on key points within my 10 Point Green Action Plan and so too, has the Farm Estates Committee, which will take some of this work forward.

These key points are:

- increasing pollinators
- Reducing pesticides and fertilisers
- Habitat protection, creation and tree planting
- Soil health
- Reducing water use

I requested the report at the most recent full council meeting, which took place on Thursday 3 October.

I thanked officers for their work so far and have asked to attend the next Environmental Board meeting and also that the Environment Portfolioholder identify green action champions within its Devon County Council farms to progress the plan. Cllr Croad agreed to these two requests.

## Risks rise as more services are cut, in latest Devon County Council care budget

*“This is a really tight budget and it’s getting harder to find savings. This is the hardest one so far.”*

Those were the words of Jennie Stephens, Devon County Council’s chief officer for adult care and health, at **January 2020’s** Health and Adult Care Scrutiny Committee meeting.

This next financial year (20/21) is the first without core government funding. Instead, the new Conservative government has offered a series of one off grants, totalling around a 10 per cent increase.

They were by all accounts better than anticipated but a decade of austerity has taken its toll.

### **The challenge so far**

A massive £272m has been wiped off Devon County Council’s finances during that time. First by the Conservative led coalition and then by the Tory government.

The council has (as have other public sector organisations) been forced to raise council tax considerably, in a miserable scenario whereby local people end up paying more money for fewer services... and the income generated is only a fraction of what has been lost.

### **A consistent and problematic shortage of paid care workers**

At the same time the cost of care is rising, so is demand. And there is a huge and problematic shortage of paid care workers, around 100 across the county.

The staffing picture is toughest in and around Exeter and East Devon, which can be seen in the numbers of people waiting every day to be discharged from the RD&E, but can’t due to the lack of paid carers.

The closure of hundreds of community hospital beds in recent years has made a challenging situation much harder.

### **Still no sign of the adult social care green paper – years late**

And the Conservative government’s inability to grasp the nettle and provide a solution on funding for adult social care, so that people don’t cripple themselves financially trying to care for relatives, is a disgrace.

The adult social care green paper has been promised for years and despite huge assistance and extremely well evidenced proposals from the Local Government Association, the new government shows every sign of batting this problem back to councils. We will see...

As a member of Devon County Council's Health and Adult Care Scrutiny Committee we scrutinised the adult care and public health budget last Thursday and made recommendations, which will be considered by cabinet.

### **No confirmation from government what the final funding settlements actually are**

Unfortunately, despite the legal requirements for councils to set their budgets by the end of February, ministers haven't got around to letting them know the funding allocations, so much of the financial planning is guesswork, especially in relation to public health.

The headlines for Devon are as follows:

- £5m cuts are proposed to the adult social care budget
- Council tax is proposed to rise by two per cent (all local public sector organisations are set to raise theirs for the same reasons)
- The public health budget is not yet confirmed by central government so a precautionary approach is being taken

### **This means a range of issues for adult social care services, including:**

- The number of older disabled people set to receive in house day opportunities will be reduced by around 70 to 100
- The number of older people set to receive paid for personal care is set to reduce by over 100 to 2,483
- Around £400,000 is being saved from the contracts budget

### **This means a range of issues for public health services, including:**

- Around 140 fewer people with alcohol addictions will be supported
- The sexual health service is set to move to an appointments only service, although this is not expected to affect the numbers of people who can be seen
- Insufficient resource for public health nursing, which means the service will be stretched

### **What are the risks?**

There's a long list of risks in the budget assessment, relating to the shortage of staffing and the increasing cost of and demand for, services.

### **No deal Brexit and immigration points system is a risk factor**

The possibility of a Brexit no deal is a "major risk" to workforce, as is a points based immigration system, as the uncertainty could deter jobs from EU nationals, according to the budget risk assessment.

The council's official risk register also records the council's ability to meet its statutory market sufficiency requirement for nursing care, personal care and demand for working aged adults, as "high" or "very high"

Director of public health, Dr Virginia Pearson confirmed that almost none of the public health budget now goes on prevention. Almost all of it now must be spent on treatment.

This directly contradicts the Secretary of State's claims, who consistently asserts that prevention is a key government priority.

### **What were the committee's recommendations?**

I asked that the county treasurer's points relating to requiring a significant increase in government funding, as well as four year settlements were set out as recommendations, as well as highlighting to ministers the dangers of their proposed new immigration policy and a no deal Brexit.

I also proposed that we record our concerns about the cuts in the provision of services for people with alcohol addictions and the late settlement for public health.

The recommendations to cabinet (some to be taken forward at central government level) on the budget paper, are set out below:

*RESOLVED that the Budget 2020/21, provisional financial settlement and its impact on spending targets and on the proposed Adult Care and Health Services and Public Health budgets for 2020/21 and the issues and/or observations set out above be noted and the Cabinet meeting on 15th February 2020 be requested to: (a) welcome and support: (i) the 10% increase to the Adult Care and Health budget this year in recognition of the sustained increase in demand; and (ii) thank the Officers for their endeavours in the effective running of the service. (b) record concern and ask (the Cabinet): (i) to satisfy itself that based on the provisional nature of the Public Health settlement that sufficient funds are in place to ameliorate any shortfall in funding and that the budget savings across the Health and Adult Care budget are achievable;*

*(ii) to call for financial consideration to support the Prevention work made possible through significant partnership arrangements with and between Districts, the third and voluntary sector and the NHS; (iii) ask for greater clarity over the breakdown of figures in the budget papers, for example, opportunities from the Better Care Fund showing the support given to the third sector; and (iv) to put pressure on Central Government to: (A) overhaul the budget setting process for Local Authorities, and move to four-year finance settlements to support financial certainty and longer-term planning; (B) give clarity over settlement figures as soon as possible and in future as far in advance as possible to enable effective service planning; (C) appreciate the insufficient funding to cover prevention and early intervention in substance misuse, particularly alcohol, and specifically ask that in the event there is additional funding in the settlement this be dedicated to prevention work with substance misuse, particularly alcohol;*



*(D) increase the Public Health Grant to enable a return to a focus on prevention, and (E) account on promises and make it aware of the impact of policies namely: (1) adequately resourcing additional responsibilities that may arise from the Prevention White Paper; and (2) recording concern about the proposed points-based immigration system impact upon recruitment in Health and Adult Care; (F) publish, without further delay, the Green Paper on Adult Social Care*

## Some of my Devon County Council budget speech – the core government grant is now gone – and service cuts continue...

This was some of my speech from Devon County Council's Budget full council meeting in **February 2020**.

Total reductions to budgets since 2010, including this one, is £272million.

Core funding to DCC has reduced by 72% in real terms.

So services are still having to be cut.

This council is now reliant only on business rates, council tax revenue and any ad hoc funding that ministers deign to pass in our direction.

Council tax is set to increase again by **3.99** per cent, to help finance an adult social care situation that sinks further into crisis every single year.

Devon's council tax across Devon's public sector has rocketed by well over 20 per cent, while each year services have been reduced significantly.

And all the while earnings stagnate.

We have seen closures of residential care homes, children's homes, children's centres, youth centres and day centres, library services reduced, support for the elderly slashed, support for vulnerable children slashed, support for disabled people slashed, support for unpaid carers slashed, potholes cratering our roads and pretty much no budget to do anything at all, other than provide the most basic of services.

There's a long list of risks in the budget assessment, relating to the shortage of staffing and the increasing cost of and demand for, services.

The possibility of a Brexit no deal is described as a "major risk" to workforce in the budget risk assessment, as is a points based immigration system.

The council's official risk register also records the council's ability to meet its statutory requirement for nursing care, personal care and demand for working aged adults, as "high" or "very high."

As a result thousands of Devon people have been plunged into hardship, struggling to manage without the services that were once available to support them.

### Devon scrutiny councillors back raft of recommendations to assist unpaid carers

**On Thursday 12 March 2020** a raft of recommendations aimed at helping unpaid carers manage on a day to day basis, were unanimously approved by Devon County Council's Health and Adult Care Scrutiny Committee.

The measures were developed following a task group I chaired over an eight month period, from June 2019.

The review recommended 12 separate areas for action starting with central government.

I proposed the review almost two years ago when it became obvious from a carers survey I saw, that satisfaction rates were declining and unpaid carers were finding things increasingly tough.

I wanted it to be a truly thorough and extensive piece of work so that unpaid carers had the confidence we would make some strong and effective recommendations.

We spoke to around 100 carers across Devon, travelling out to all parts of the county, in order to hear what pressures carers were facing.

It was tough hearing the stories. Our hearts went out to people who told us repeatedly that they felt trapped, stressed, were responsible for caring for their loved ones 24 hours a day, seven days a week.

Added to this were people who are worried about the future. Stressed about the uncertainty of how they will manage an increasingly frail partner, with a paucity of options available.

Often unpaid carers are unwell themselves, as they neglect their own mental and physical health, with the demands of caring for their husbands or wives, mothers or fathers.

The pressures that austerity has created relating to there being less paid personal care, an ongoing shortage of paid care workers, the closure of many residential homes, including Devon County Council owned homes, has taken its toll.

Paid care is not only hard to find, it is expensive.

Adult social care budgets have been eviscerated under this government and it has also been remiss in not providing a solution to the resulting crisis, where people are at risk of losing their life savings if they need non-NHS care.

It is unfair for people to be means tested for basic care if they have dementia, yet receive care for cancer under the NHS.

Quite clearly, in an evolved democracy and the sixth largest economy in the world, we must provide much better support for our vulnerable citizens.

There must be urgent action from central government on this and new funding needs to be provided to ensure that unpaid carers and those they care for are fairly and adequately provided for.

This is ultimately, where the buck stops.

There are also a raft of more localised recommendations for Devon County Council carers service, as well as Devon's NHS Clinical Commissioning Group.

The most often cited request, was simply: I need a break. But the only break I get is an hour in Tesco's once a week.

Many carers told us that they were struggling financially and had trouble claiming the benefits that they were entitled to, despite letters of support from their GP.

There are recommendations for central government on this too.

I thanked Scrutiny Officer, Dan Looker for managing the review – and my cross-party task group colleagues for leaving politics at the door and working effectively as a team to help produce this report.

I asked for a follow-up item in order to keep track of progress, to be scheduled for the September meeting. This was agreed.

### [Devon County Council set to write to Secretary of State requesting urgent resources for adult social care](#)

The Secretary of State for Health and Social Care was to receive a letter from Devon County Council, requesting urgent resources for adult social care services, following my proposal at **March's** Health and Adult Care Scrutiny Committee.

I made the proposal at the Health and Adult Care Scrutiny Committee meeting, on Thursday (12 March) during an item on the council's preparedness for Covid-19.

The previous week the chancellor had outlined £5bn extra funding for the NHS in the Budget, but Devon County Council's Chief Executive, Phil Norrey, said he was not confident that adult social care would receive much, or any of that funding.

Dr Norrey, flanked by two NHS colleagues, outlined to the committee some of the measures the council and the NHS were taking to prepare for the forthcoming epidemic, which is widely predicted to be the country's biggest challenge since the world war two.

The measures include suspending routine surgery and using operating theatres to manage patients, as well as reopening community hospital beds, hundreds of which have been (in my view mistakenly) closed over the past five years.

Many people are worried that the NHS will not be able to cope with the numbers of people requiring hospital treatment, as it is running at full capacity much of the time already.

A decade of the government starving the NHS of resources has not helped matters.

Dr Norrey told the committee that he wasn't "wildly optimistic" about the council receiving much resource for adult social care and that he hadn't seen the precise sum.

Worryingly, he added that the importance of social care in supporting the most vulnerable appeared not to have been recognised as yet, at central government.

He said there seemed to be "a bit of a misunderstanding" about what social care support does and that he was hearing references only that day about "meals on wheels", without the recognition of the important decisions that are made in people's homes by care workers every day.

*Update: The situation in the end was that Devon County Council received its share of the funding and didn't need to send the letter. Although councils all over the country have been hit hard by the huge amount of extra work that has had to be done relating to coronavirus.*

### More deep cuts loom as Devon's NHS must save over £400m by 2024

Devon's NHS continues to be in a financially precarious position and must make more significant cuts to operations, in order to break even by 2024.

Over £400m must be slashed from Devon's NHS by 2024, from an annual budget of £2.6bn.

That was the main message from a report that was examined by members of Devon County Council's Health and Adult Care Scrutiny Committee, on **Thursday (12 March)**.

Devon's NHS has been in a financial hole for many years, described as being in the top three most financially challenged health areas in the country, for much of the last decade.

But matters appear to have deteriorated and it seems that NHS England may now consider our local NHS to be in the top two most financially challenged health areas in the country.

From April, Devon's NHS is under orders to save over £100m by next March, after which there must be a programme of swingeing cuts until at least 2024, overseen by NHS England.

Sustainability and transformation plans were set up some years ago all over the country to implement the government cuts agenda, which forced NHS organisations to make savings to the tune of £30bn nationally. This is the latest iteration.

### **The scrutiny challenge**

I have tried my hardest to try and keep track of these local savings via my role on the Health and Adult Care Scrutiny Committee, but the reality is that the NHS can be incredibly opaque – and each time I asked for a paper on these cuts, the committee has been given no more than a cursory report of vague areas where local NHS services were making savings.

It has been frustrating and quite wrong given the committee's legal role in examining changes to health services, on behalf of local people.

I have been aware of private health scrutiny briefings on this issue for a few weeks and emailed committee chair, Sara Randall Johnson in January, asking for a paper to come to the March meeting.

There was no reply to my email.

### **Waiting times have soared**

Over the past decade nationally and locally, waiting times have soared and more people than ever (who can afford it) are opting to go private for treatment because of long waits.

From simple treatments such as physiotherapy for a sports injury, right the way through to paying around £13,000 for a hip operation.

The presentation for Thursday's meeting states: "In line with savings made in previous years for the system to break even by 2023/24 recurrent savings of between £99m and £108m are required **every** year."

The presentation also states that the main challenges are focused on catering for a growing and largely elderly population in the county.

The most pressed area of the budget is acute care (such as at the RD&E or Plymouth Hospital for example).

The presentation refers to the impact of Devon's NHS being both short of staff and short of cash:

- 300 people routinely waiting for more than a year for treatment when the target is 18 weeks
- 12 times as many people waiting over six weeks for key diagnostic tests than should be
- Eight out of 10 hospital beds are used for emergency purposes
- Devon's population is set to grow by 33,000 in the next five years and by 2030 there will be 36.5 per cent more people over 75 years compared to today
- 25 per cent of children in Devon are overweight or obese and this rises to 33 per cent by the time they leave primary school

### **Bed cuts**

The paper states: "If the way beds are used is not changed, the number available for planned, low risk treatment and operations will soon be zero."

But over 200 community hospital beds have been closed in the past few years, and hundreds more acute beds in the area.

Unfortunately, the numbers of paid care workers have still remained a huge problem, leading to significant delayed transfers of care (hospital discharges) from the RD&E Hospital, in particular.

Senior doctors have been saying for a long time that we simply don't have enough beds.

According to the Kings Fund the total number of NHS hospital beds in England, including general and acute, mental illness, learning disability, maternity and day-only beds, has more than halved over the past 30 years, from around 299,000 to 142,000, while the number of patients treated has increased significantly.

The Fund states that most other advanced health care systems have also reduced bed numbers in recent years. However, the UK currently has fewer acute beds relative to its population than almost any other comparable health system.

Thursday's committee paper does not refer to the annual NHS increment which plummeted to around one per cent from around six percent, in 2010.

This will, of course, had a significant impact on how the NHS is able to deliver care.

### **Areas for action**

I had hoped for a bit more detail on how Devon's NHS were going to manage around £100m of savings in the next financial year but I'm unable to find anything approaching informative detail on this, which makes it quite hard to scrutinise effectively, on behalf of local people.

However, the presentation outlines the broad areas for action as the following:

- Transforming out of hospital care and integrating community services

- Reducing outpatient appointments by 30 per cent
- Address the challenges of increasing demand of hospital beds
- Consideration of creation of a major diagnostic centre in Devon
- Travelling further for planned care, such as a hip operation
- Widening access to online GP consultations
- New technology monitoring equipment supporting people to live independently in their own homes
- Support more people in their home and community and avoid urgent admissions to hospital
- Improving cancer outcomes
- Improving mental health services through a ring-fenced investment fund
- Shorter waits for planned care through protected capacity
- Reducing health inequalities
- Setting minimum requirements for community based care to reduce pressure on emergency hospital services

So Devon's NHS is being requested to make further cuts at a very difficult time.

### **A long-term lack of paid carers are hampering hospital discharges**

The desire to avoid hospital admissions and to get people out of hospital quickly is long-held one but is increasingly hampered by a significant and long-term lack of paid care workers, especially in the Exeter and East Devon area.

The massive government funding cuts to adult social care has also meant the closure of many care homes and a big reduction in the number of people who are now receiving paid personal care.

The impact of much of this falls on unpaid carers looking after loved ones.

### **Public health budget pressures**

As for Mr Hancock's oft repeated mantra of investing in 'prevention', by which he means public health (preventing people from getting ill in the first place), Devon County Council's Director of Public Health, Dr Virginia Pearson summed it up at January's budget meeting:

She said almost none of the budget now goes on prevention. Almost all of it now goes on treatment because of government funding cuts.

### **Devon County Council still at risk of not providing enough nursing care or personal care**

Finally, the council's latest risk register has now been published for Thursday's meeting. The following risks are among those recorded as 'high':

- Inability to recruit appropriate qualified adult social care professionals
- The council fails to meet its statutory market sufficiency requirement for nursing care

- The council fails to meet its statutory market sufficiency requirement for personal care

The pressures facing Devon's NHS are not of the fault of staff. They are as a result of government underfunding, forced cuts and the demographics of age and demand.

It's even more worrying at a time of a predicted coronavirus epidemic.

I see my role as a member of Devon's Health and Adult Care Scrutiny Committee, is to ensure as much information reaches the committee to be examined in an open and transparent way, so that local people's interests are being served as they should be, at least from a scrutiny perspective.

*Update: I proposed at the meeting that the requirement to reduce services be suspended until after the coronavirus pandemic. But this was voted down by the majority of the committee. I understand though that the requirement for the Long Term Plan (cuts plan) to be presented to NHS England last month was deferred. I have enquired about the detail on this....*