Dear Members and Officers,

I am choosing to write about three items of some importance (Council Tax, Highways funding, and, matters related to the Holsworthy Hospital) and would appreciate you sharing such information with residents for which I am sure there will be some interest. I apologise in advance for the following being a comparatively long update.

Members and officers will be aware that organisations like Devon County Council (DCC) have just approved/in the process of approving Budgets for 2019-20. This is not an easy job. Central Government funding for local authorities has been reducing, very significantly, since 2009. Locally, such cuts have been in the order of £25million to £30million, annually. With 10 years of austerity along these lines it doesn’t take much to work out the cumulative losses that councils such as DCC have had to bear.

Funding for DCC and alike authorities is now very closely aligned to the Government’s long-term objective that essential funding be dependent upon 2 things – Business Rates and **Council Tax.** Given the uncertainties still around the former, it is the latter about which I would like to comment.

I want to give you an example – one that is pretty extreme (but true) and, will serve to make my point. The council tax on a seven bedroom house worth £17 million in Westminster would only accrue a £1,376 annual council tax bill, whilst the occupants of a Band D property in Torridge (say, worth around £400K) would be expected to fork out £1823 each year. There is a real issue for me in terms of how much the amount of tax paid varies from area to area.

The Ministry of Housing, Communities and Local Government’ own data for 2018-19 shows us that:

* The average Band D council tax set by local authorities in England for 2018-19 will be £1,671 which is an increase of £81 or 5.1% on the 2017-18 figure of £1,591.
* In 2018-19, 148 out of 152 adult social care authorities utilised some or all of the 3% adult social care precept flexibility when setting their council tax. This additional flexibility accounts for £30 of the average Band D council tax bill.
* The average area Band D council tax will be £1,405 in London (an increase of £55 when compared to 2017-18), £1,658 in metropolitan areas (+£83), £1,729 (+£89) in unitary areas and £1,749 (+£86) in shire areas.
* The council tax requirement in 2018-19 is £29.6 billion, of which £538 million (1.8%) will be raised through the adult social care precept, and £518 million (1.8%) will be raised through parish precepts.
* For those areas where parishes charge a precept, there has been an average Band D parish precept increase of 4.9% in 2018-19.

Last year, I quoted rates of Band D Council Tax for different areas. I’d like to re-iterate:

- Average for England at £1671

- Average for London at £1405

- Average for Metropolitan at £1658

- Average for Shires at £1749

- And, for **Torridge …. £1821**

With low wages and rural isolation as we have it I am not quite sure how this measure is in any way fair and have raised it again - most recently - at DCC Cabinet’s last meeting.

**HIGHWAYS:**

Councils in England and Wales paid out £45 million last year in pothole-related compensation, including to cyclists, according to Freedom of Information figures obtained by BBC Radio 5 Live Investigates. Cycling UK supports the Local Government Association’s long-standing call for the Government to re-invest a portion of existing fuel duty into local road maintenance every year to help generate funding for councils to spend on addressing the £9.3 billion roads repair backlog.

For us locally there is a bit of positive news on the funding for our road network.

There will be 3 mainstream additional funding areas:

1. Pothole Action Fund (PAF)

2. £4.4 million Resilience Fund (RF)

3. Extra £6.5 million for highways, proposed by cabinet and ratified by full council in February 2018

PAF:

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| --- | --- |
| Electoral Division | Allocation |
| Bideford East ED | £26,477.00 |
| Bideford West and Hartland ED | £79,000.00 |
| Hatherleigh and Chagford ED | £60,148.00 |
| Holsworthy Rural ED | £118,375.00 |
| Northam ED | £23,172.00 |
| Okehampton Rural ED | £26,409.00 |
| Tavistock ED | £19,139.00 |
| Torrington Rural ED | £77,601.00 |
| Yelverton Rural | £34,033.00 |

TOTAL £464 354 (POTHOLE ACTION FUND)

RF:

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| Electoral Division | Allocation |
| Bideford East ED | £58,859.34 |
| Bideford West and Hartland ED | £175,617.66 |
| Hatherleigh and Chagford | £133,707.94 |
| Holsworthy Rural | £263,148.53 |
| Northam ED | £51,512.24 |
| Okehampton Rural ED | £58,707.85 |
| Tavistock ED | £42,546.12 |
| Torrington Rural ED | £172,507.45 |
| Yelverton Rural ED | £75,660.15 |

(RESILIENCE FUND – TOTAL £1 032 267)

CABINET FUNDING £6.5M to be targeted towards; Highway drainage, Highway patching, and pothole repairs.

**HOSPITAL – related**

The Holsworthy Community Involvement Group continues to work with members of the Clinical Commissioning Group in addressing local concerns related to our hospital. The recent update from the group includes, “Northern Devon Healthcare NHS Trust is working on a project in partnership with Macmillan Cancer Support to improve the quality of life for people with cancer in northern Devon. The Living With and Beyond Cancer Project is focused on ensuring all cancer patients have access to support, feel that their needs are understood and feel enabled to take an active role in their care. To complement the developments that are happening through this project, the counselling team launched their first counselling outreach project in northern Devon at Holsworthy Community Hospital in October 2018.”

And, “Project lead Steven Johnson-Wood said: “Cancer can affect many areas of a person’s life, not just their physical health, and counselling can help people cope better with the difficulties faced during and after cancer diagnosis and treatment. The counselling team at Northern Devon Healthcare NHS Trust recognise that their services are incredibly valued by patients and we’re really pleased that the cancer care counselling service is now available in Holsworthy, bringing this service closer to home for the Holsworthy community and adding to the variety of clinics, services and groups offered at the hospital.””

Early indications from the Community Survey which show EOL care is a priority, the Holsworthy Community Involvement Group (HCIG) has officially requested the NHS to consider interim bed provision for the town and local area. To this end, the CCG and NDHT are now in discussions with a view to supporting EOL and rehabilitation inpatient beds by working with other local providers.

If approved, this will complement the >50 services, clinics and groups at Holsworthy Community Hospital. This includes new services such as those for chronic kidney disease, depression and anxiety, multiple sclerosis and kidney care. In addition, there are >35 Health and Soc Care Staff providing care in the local community to rehabilitate patients, avoid admissions and promote independence.

With every best wish,

Barry