

A Vision of the Future for Devon

The "Alternative" Report on the Devon County Council Consultation on the Proposal to cease the contribution to the 18+ Homeless Prevention funding across Devon.



Comparison of reports on the consultation

In the report to the June 13th Scrutiny Committee Meeting the data was rather confusing:

- We were told that in the public consultation there were 990 responses, but that 29 of those were blank. Which should therefore give 961 “not blank” responses.
- We were then told that the 990 responses were made up of 904 online responses, 78 emails, 3 letters, a YouTube Video and notes from 4 providers meetings. (Total 990 – so that works)
- We were then told that the division of the responses was 822 from Devon Citizens, 47 from Providers or their Staff, 42 from other Agencies, 27 from Service Users and 1 from a Trustee.
 - *But* $822 + 47 + 42 + 27 + 1$ (plus 29 “blank”) = 968.
 - We appear to be missing 22 responses. were they unclassifiable?
- We were then told that 925 of the responses were against the proposal and 3 were neutral.
 - Again, $925 + 3 + (29 \text{ “blank”}) = 957$ so now we are missing 33 responses.
 - Is the report implying that these 33 must therefore have been “for” the proposal?
 - **That is not what we found!**

The reporting on this data has been very confused from the start. In the reports for the meeting on 27th July 2023, we note that all these figures have been hidden away and just the 925 against and 3 neutral figures are being presented. That would indicate that 33 responses that were not blank are not being considered in their evaluation.

This is why we requested a Freedom of Information access to the data so we could have some transparency in this process and see for ourselves.

Our Freedom of Information was refused and so we had to appeal for an internal review and explain the legislation to DCC’s Access to Information team who then realised their mistake and we were provided with the information but only after having to wait more than twice the legally prescribed timeframe, causing the information to not be available to us at the last meeting.

The document provided to us (in a most unhelpful format) is clearly missing a number of responses that DCC list above, including:

- No copies of the notes from the 4 provider meetings
- We have been given 12 emails and not 78!
- No YouTube video link

Despite not receiving at least 70 of the mentioned responses, we counted 932 responses from the data that was supplied. That would call into question the total responses being 990 as DCC state, the actual figure would be over 1,000.

Our analysis of the Public Consultation responses

As the information was passed to us in PDF format, we had to meticulously extract each response from the document and enter it into a spreadsheet manually in order to scrutinise the data. [This spreadsheet is available to download here.](#) You will find our calculations and methods for analysis within it

We read through each and every response individually. Where a provider sent in a response that included responses from their residents specifically in response to the consultation, we concluded each of these to be an additional response.

Organisational responses (regardless of the size of the staff team) were allocated as a single response. The Joint Districts response was counted as 1 response for each district that signed the letter.

We did not count blank responses; they were deleted from the dataset.

The result was a total of 932 individual responses.

925 of these expressed a very clear message of not supporting or opposing the cut proposal.

7 of them did not express a clear message either way. For example, one said: *"the political leadership of DCC should resign forthwith for years of incompetence and lack of effective stewardship."* and another said, *"Care must be focused locally to meet local needs."* We couldn't take these to be either way as whilst they expressed an opinion, it wasn't clearly stated to be in favour or against the proposal.

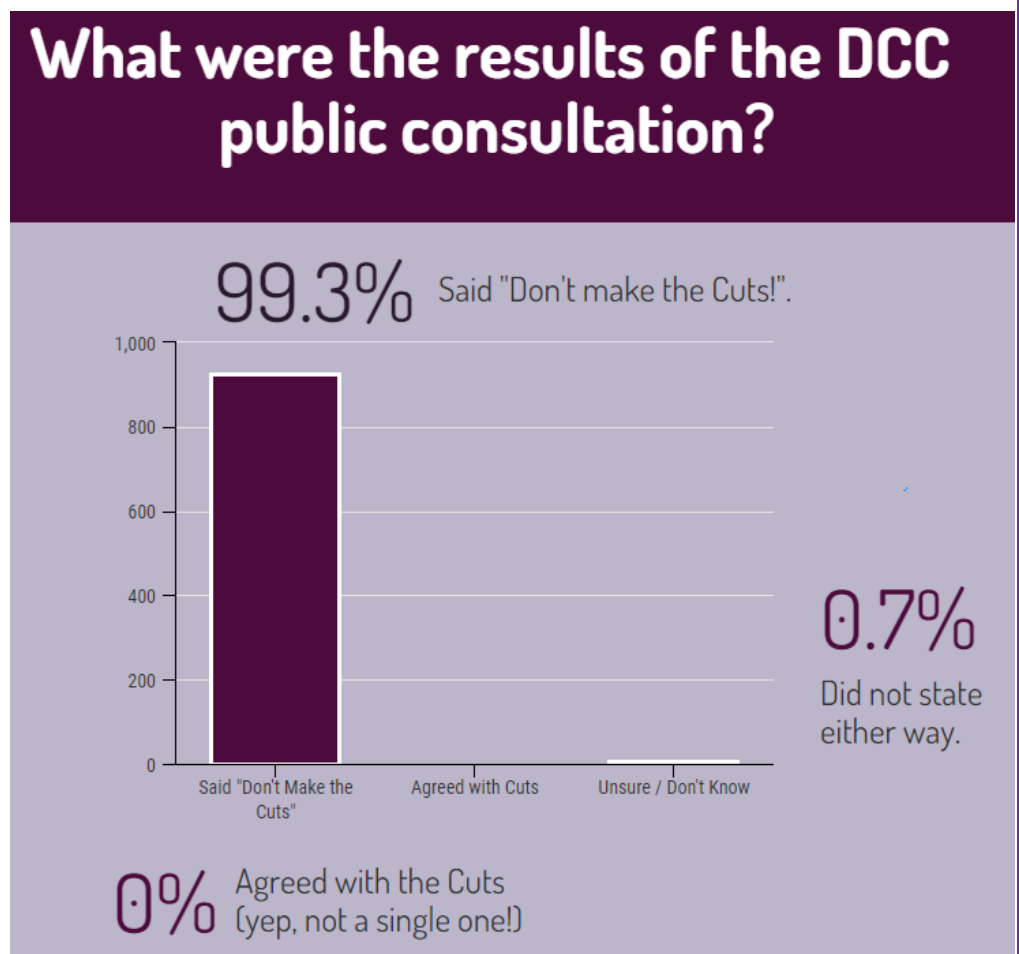
But none (zero) expressed support of the proposal.

Our social media post (*shown right*) presents the data in a helpful Bar Chart:

99.3% against the proposal,

0.7% didn't say either way,

and 0% were for it.



The responses from the citizens of Devon, which includes staff from providers, but also include other professionals such as Doctors, Psychologists, Finance Professionals, University Researchers, and many others were very strong and emotive.

We analysed the language used in regard to this proposal and can display some of the data here (you can review the spreadsheet for more examples of descriptive words used)

100% of respondents said "NO" to the cuts.

We read all 925 responses. This is what Devon thinks about the proposed funding cuts...

"Devastating" "Counter Productive"

34 different responses used this word to describe the effects of any cut

18 responses described the cuts this specific way.

"Catastrophic"

24 responses used this word to describe the proposal's effect

"Disgusting"

14 different responses used this word.

"Dangerous"

14 respondents described the proposal as dangerous

"Short-Sighted"

A huge 139 different responses used this same word to describe the proposal.

"Shocking"

22 respondents described the proposal with this word

"Immoral"

29 individual responses described the proposal in this way

"Criminal"

17 respondents used this word about the proposed cuts

"Dire"

36 used this word to describe the proposal

"Consequences"

46 respondents used this word in expressing their concerns

"False economy"

26 responses described the proposal in this way

Highlighted Individual Responses

The Bishop of Exeter, Rt. Rev'd Robert Attwell highlighted that YMCA Exeter is playing a massive role in reducing Devon County Council Statutory spending. *"It intervenes at the crisis point in a young person's life and prevents them from getting to a place where they need the County Council to provide an adult social care package."*

The Current Chair of Devon County Council, Cllr Percy Prowse says that in the budget papers presented to Councillors for this financial year, *"details of the proposed cessation of funding does not appear as an identified item"* and that he is *"disappointed at the decision to propose its cessation"*. He states that he has been following the work of the YMCA closely for 30 years and that *"The Council provides what on the face of it is a small budget to financially assist the running costs for 85 supported people"*. In his narrative he concludes that if the YMCA ceased to function *"the cost to DCC far outweighed any savings"*.

Leader of East Devon District Council, Cllr Paul Arnot states that his Cabinet and his Senior Officer Team have *"Grave concerns about the risks"* presented by the proposal. He describes the services provided under the contract as *"Integral"* to the operation of the District and that without it this *"specialist support and intervention ... what is already a homelessness crisis will escalate further"*.

He questions what will happen when District and City Councils are presented with a homeless individual whose needs clearly show that they will not succeed in a temporary housing solution without help; *"what solutions we will actually be able to provide for people who present to us if we are not able to refer into these projects that provide the specialist support these vulnerable people need?"* It is then likely that this will lead to us not being able to provide them with safe solutions for temporary accommodation. What is to be done then?"

The Leader recognises that by choosing not to spend a small amount of money toward prevention you immediately have to spend a larger amount of money on individual care packages and reports that it *"all makes little financial or practical sense"*.

Fact Checking Devon County Council's Report

We have "Fact Checked" the Full Report being submitted to the Adult Health and Social Care Scrutiny Committee on the 27th July, and here are just some of our findings: The number in brackets (x) references the paragraph numbers in the sections of the report.

In the Covering Paper Section:

- (6) Hundreds of the responses to the Public Consultation and nearly all the larger National Experts have highlighted the Risk of DCC not meeting its Statutory Duties in regard to Health Inequalities by ceasing this funding and the impact it will have on the client group served. Point 6 states that the Council have *"investigated this matter thoroughly"* and concluded that it has *"no duty"* but doesn't give any information as to how they have concluded this.
 - This would be expected to appear in the "updated Risk Assessment" that is linked to in the report, however this "updated" Risk Assessment is not available because it has not been published.
 - When asked about this DCC responded *"By the time the papers are submitted to Cabinet for their meeting on 23 August, the impact assessment will have been updated, to take account of any update needed between now and then, including anything following the Special Scrutiny Committee"* however Section 100B of the Local Government Act 1972 says that local authority meetings should not go ahead if any reports for the meeting have not been made available for inspection alongside the agenda five clear days before the meeting takes place.

- Also, this is a specially arranged meeting, scheduled because the relevant information had previously not been presented for the Scrutiny committee to scrutinise. This is now another example of a key document being withheld from scrutiny, to be taken directly to Cabinet and makes a mockery of having a scrutiny committee at all.
- (7) “A mutual obligation to co-operate”: DCC have defined this as “where it is asked by a district to assist it will offer such co-operation and assistance where it is reasonable to do so and it does not result in the council doing anything which districts is supposed to do”. The City and District Councils (all of them) have asked for a proper amount of time and consideration to jointly try to solve this together. Where is your offer of cooperation in this request?
- (8) Factually questionable. The City and Districts Councils repeatedly state in their individual and joint consultation responses that DCC have not been working closely with them. We question therefore if this statement is true?

The Full Report, Section 2: Context

- (2.1) The implication here is that Prevention is not something we must do which is the core of the problem with DCC’s thinking. In a time when we need to save money, we must focus on innovative work that immediately saves money from otherwise costly Statutory Care Provision and wider County costs.
- (2.2) District and City Councils have asked for details about the savings strategy and what other areas in Adult Social Care funding have been cut or considered to be cut. No detailed information has been provided. One of the main issues highlighted by the Chair of the Council was that the cuts were not identified in the Budget when it was accepted and so no one knew what was being lost. Had it been known at the time; this may well have made a difference to the way in which many Councillors voted on the budget.
- (2.3) We find Point 2.3 to be factually incorrect. Districts and City Councils state that DCC has not engaged well with them, and the evidence provided, including from DCC officer reports, show that there was NO intention to engage with providers (who had to request a meeting after being notified of the proposed cuts).
 - Most notably, there has been no engagement with users of the services by DCC at all.
 - The “Public” Consultation process was not advertised beyond providers and CEOs of District Councils and therefore cannot be considered to have been a “public” consultation.
- (2.4) [Please see this specific section on the proposed “alternative funding” and our assessment of how well this has been considered.](#)
- (2.5) DCC claim to have a strategic approach to saving but this doesn’t recognise the role of prevention work. There is no rebuttal to any of the evidence of how prevention saves money and how cutting it will impact the DCC budget in this and future financial years.

The Full Report, Section 3: Funding to prevent homelessness.

- (3.1) This point is factually incorrect and belittles the work of Supported Housing which is highly regarded in all sectors as playing a vital role in tackling Homelessness regardless of who is funding it. DCC state that *“other County Councils in two tier areas do not directly contribute funding in this area. Those that do are reducing their contribution.”* **This statement is false.** You will see from [this section that more than half of all Councils in two tier areas DO directly contribute](#) and not all that do are reducing their funding.
 - The comment *“reducing reliance on hostels”* is an offensive and condescending remark on professional, high quality supported accommodation across the country but **specifically to those in Devon.** YMCA Exeter, for example, have been serving in Exeter for nearly 180 years and for 30 years have provided high-quality residential hostel supported accommodation for young people from across the county that is an example of Best Practice cited on a National level. Locally their work is applauded and recognised and of the near 1,000 responses to the public consultation a vast amount specifically highlighted their excellent work. Devon has no requirement to *“reduce its reliance”* on making use of such a valuable resource that has enabled thousands of Devon Young People to improve their life situation.
- (3.2) DCC is also expected to follow the updated **2011 Best Value Statutory Guidance** which states: *“To achieve the right balance – and before deciding how to fulfil their Best Value Duty – authorities are under a Duty to Consult representatives of a wide range of local persons; this is not optional. Authorities must consult representatives of council tax payers, those who use or are likely to use services provided by the authority, and those appearing to the authority to have an interest in any area within which the authority carries out functions. Authorities should include local voluntary and community organisations and small businesses in such consultation. This should apply at all stages of the commissioning cycle, including when considering the decommissioning of services.”*
 - **It also states that:** *“An authority intending to reduce or end funding (where ‘funding’ means both grant funding and any fixed term contract) or other support to a voluntary and community organisation or small business should give at least three months’ notice of the actual reduction to both the organisation involved and the public/service users.”*
 - **And also, that:** *“An authority should actively engage the organisation and service users as early as possible before making a decision on: the future of the service; any knock-on effect on assets used to provide this service; and the wider impact on the local community.”*
 - **And also, that:** *“Authorities should make provision for the organisation, service users, and wider community to put forward options on how to reshape the service or project. Local authorities should assist this by making available all appropriate information, in line with the government’s transparency agenda.”*
- (3.2) also doesn’t address these directions in Statutory Guidance and we feel it should.
 - How does DCC regard how it has managed this Consultation exercise in the light of this Statutory Guidance?
- (3.2) is also Factually Questionable. DCC state that they consulted on the proposal to cease funding the contribution as part of the budget setting process for 2023/24. Who did DCC consult with PRIOR to the Budget setting process for 2023/24?

- (3.3) *“Inextricably linked”* means that the housing and the support have to happen together. Therefore, it is fair to say that District Authorities and County have to work together.
 - We do not understand the usage of the term: *“recovering from “homelessness”*. Homelessness is not a disease nor the core reason for their situation. Addiction, Mental Health issues, past trauma these could be core reasons that cause a person to require other interventions, such as help with accessing and maintaining accommodation, but could also mean keeping health care appointments, feeding themselves, washing, dressing appropriately, managing self-harm and suicidal ideation.
 - In this point (3.3), DCC appear to be attempting to present the issue backwards. Homelessness isn't the reason they are homeless, if it were then District and City Councils would be responsible for housing them and that would fix the problem. That is the case for many other people who the districts do this for everyday because those people are not *“inextricably linked to complex and chaotic life experiences”* as this client group are.
 - This lack of understanding of supported accommodation is a worrying example of how well DCC understands this well-established sector's purpose and way of delivering services.
- (3.5) – (3.7) [Please Refer to our Section on Homelessness Funding from Central Government and the Alternative Funding](#)
- (3.8) DCC state that it is *“committed to supporting the prevention of homelessness and invests in support for people across multiple areas of their lives, including substance, drug and alcohol misuse”* however this funding and how effectively it is used will be linked closely to the current framework of supported accommodation provision. Public Health Devon note this in their risk assessment provided as part of the responses to the consultation (at DCC's request). The risks that they highlighted didn't seem to make it into DCC's own risk assessment, but for reference they said that the cessation of funding would:
 - Reduce the number and mix of professionals in the workforce posing further risk to:
 - the facilitation of integrating Mental Health and substance misuse treatment services,
 - the ability to develop an alliance approach,
 - prevent those with lived experience to gain employment,
 - increase demand on staff capacity affecting their ability to be trauma responsive and compassionate,
 - negatively impact on staff resilience due to burnout and health and wellbeing issues,
 - Adversely impact on accessible provision of substance misuse services and support, particularly to the most vulnerable,
 - Reduce access to drug and alcohol treatment services,
 - cause inappropriate referrals,
 - Reduce effectiveness of treatment for the client group,
 - Adversely impact on the successful delivery of the STaR (System Treatment and Recovery) as funded by OHIDs Rough Sleeping Drug and Alcohol Treatment Grant, commissioned by Public Health,
 - **The funding cited by DCC in this case will be significantly less effective if they continue with the proposal, possibly to the point of being ineffective which is a waste of money.**

- Nobody that we spoke to in District or City Councils appear to even know what the **Housing Taskforce** is! Therefore, citing it as an example of intervention in housing for the districts is very questionable!
- (3.9) The funding that DCC helped South Hams and West Devon District Council to bid for was significant at **£300,000** but what was it spent on? It was not used for creating new supported accommodation or revenue funding for current provision. It wasn't used for Homelessness Outreach services, or homeless Pods or for employing Support workers. It was for funding the District Council's HB department to seek out and tackle unprofessional exempt accommodation providers. It's not the best example of revenue funding work to prevent homelessness.
<https://www.westdevon.gov.uk/article/9365/Borough-Council-Secures-Funds-to-Protect-Vulnerable-Tenants>
- DCC's involvement in the SHAP bids has been minimal at best. Described as a single conversation with 1 person, half a year ago.
- (3.10) ECC officers have been invited to and attended 3 meetings to date (2nd March, 4th May, 6th July). DCC's agenda items for these meetings has been "The" agenda for these meetings has been initiated by DCC bringing items on social care related service gaps and social care housing enablement. Homelessness has not been a standing agenda item and has in fact been added on request of ECC to all three meetings. At none of the three meetings to date has the DCC officers been able to discuss any details, plans or mitigations relating to the DCC Homelessness funding. It would be disingenuous to suggest that this forum with ECC has to date been a dedicated space to share concerns and plans relating to homelessness, especially in relation to this funding issue.
- (3.11) Is a very confusing statement that appears to contradict itself.
 - Firstly, it says "*Should Districts and City Councils not develop any alternative mitigation plans*" seemingly putting the emphasis on the Districts to lead and create the mitigations whilst other points in the report state that DCC have been working on this.
 - Secondly, it notes that the recommendation "*may increase demand for other services across health, care and housing*" which appears to be an **incredible understatement aimed at downplaying the severe impact that every other professional agency and member of the public in Devon has already clearly identified.**
 - Finally, it states that if the Districts and City Councils do not develop solutions, and there is a huge impact on all areas of the system then the "*council is working collaboratively to address these system risks*". **In this context, who is the Council "collaboratively" working with?**
 - (3.13) DCC say that Key risks have been identified and mitigations have been developed however there is no evidence of this, and the report doesn't link to a Key Risks and Mitigations plan. The point refers to the "*updated Equalities Impact assessment*" which it says is in Appendix B; but there is no Appendix B in the Report Pack. Investigation into this reveals that **this Impact Assessment has not been updated, making this statement factually incorrect.** The Assessment hasn't been published and we were informed that it will not be before the meeting despite Section 100B of the Local Government Act 1972 stating that local authority meetings should not go ahead if any reports for the meeting have not been made available for inspection alongside the agenda five clear days before the meeting takes place.

The Full Report, Section 5: Consultation feedback

(we've not missed Section 4, Options. [We'll cover that later in this section!](#))

- **(5.1) This point contains factually incorrect information.** DCC call this consultation a "Public Consultation" however they only revealed its existence and directed access to it, to the providers under the contract and to the District and Council CEOs. We therefore challenge that it was a "Public Consultation" as the public was not informed in any way of its existence beyond its inclusion on the "Have your Say" website, which you would only visit if you were specifically directed there after being informed of a consultation's existence.
- The consultation was only accessible online. No mention of it was made on DCC social media platforms, nor on its website, or in any other public communication.
- DCC made no attempt to contact other stakeholders or users of the services despite reporting to the Adult Care and Scrutiny Committee Meeting that it would!
- When directly contacted and asked to publicise the consultation, DCC refused to do so and continued to ignore requests. Therefore, this point is factually incorrect. This was not a Public Consultation but only a consultation aimed solely at the providers and City and District CEOs. Furthermore, the results of the consultation were never intended to be shared with the public or those who responded to the consultation.
- **(5.3)** See point 3.13. There is no updated equalities Risk Assessment either in the report or published to a web site. This is in breach of Section 100B of the Local Government Act 1972 .
- **(5.3.1)** We are interested in DCC's reflection on the breakdown of the categories of people that responded to the consultation. Our question is, when you weren't advertising the consultation and hiding it online – who were you hoping to be targeting?
- **(5.3.2)** We challenge this summary as being factual. The single largest factor that the District and City Council's responses highlighted was that as people with high level complex needs present as homeless then a temporary accommodation (non-supported) placement is unsafe, inappropriate and doomed to quickly fail. Without a supported housing option, what solutions are they expected to provide? Provision of support to vulnerable adults is not directly or singularly the responsibility of the District and City Councils.
- **(5.3.3)** D&C Councils have been requesting information and made written representation to DCC officers and also into the consultation to jointly assess options and mitigations including some potential ideas around managing funding reductions. To date ECC has been told the recommendations to DCC Committee would include recommendations to work with D&C Councils. But no timetable has been offered for that and no return offer to meet has been made despite repeat requests from ECC to do so. This is very disappointing and again does not demonstrate partnership or collaborative working; quite the opposite in fact. DCC state that "*the Housing Act 1996 and the Care Act 2014 impose a mutual obligation to co-operate*" and that "*where it is asked by a district to assist it will offer such co-operation and assistance where it is reasonable to do so and it does not result in the council doing anything which districts is supposed to do*". This has occurred; but without suitable response from DCC.

- (5.38) The statement is confused. It is not just homeless people that face being impacted by Anti-Social Behaviour but all citizens of Devon. When people with chaotic lifestyles do not receive any proper assistance or intervention, then you can expect the general public to suffer the effects of Anti-Social Behaviour, increased crime and public drug and alcohol usage on a day-to-day basis.
- (5.3.12) – A point of clarification that nearly every response that acknowledged that “housing is not the statutory duty of the county” also pointed out that managing health inequalities was.
- (5.3.15) Factually incorrect. No respondents to the consultation identified alternative funding for providers. 1 or 2 respondents asked the question “IF” DCC or other agencies could find some other way of funding the services to keep them going. No actual specific funding options were identified in the responses.
- (5.4) Point of clarification on the FOI request.
 - Initially the FOI was refused, had to be appealed, and that appeal was won.
 - The information received was in a less than ideal format and it’s clear that a large part of the response was withheld (for example the report states there were 78 emails and the FOI request received just 12) and no notes from provider meetings were provided.
 - The redaction often didn’t make any sense at all. Anonymised data was redacted preventing full understanding of levels of service achievement. Whilst some information that should have been redacted was missed; a potential breach of GDPR.
- (6.4) The report cites Living Well as part of its Key Strategic Planning. The Living Well document concludes with this paragraph about listening from DCC:
 - Residents, carers and partners are at the heart of our work and are involved at all stages of planning and delivering care. We will continue to make sure that people’s views and experiences are heard, taken into account and influence how we achieve the best possible support for people.
 - If this is a strategic point, highlighted in this report on the consultation, when all the responses from “Residents, carers and Partners” have collectively and unanimously asked you not to go ahead with this proposal you are clearly NOT listening, they are not “at the heart of your work”. They are not taken into account, and they do not influence how you go about achieving the best possible support for people.
- Living Well also contains these commitments, from “listening” to the community,
 - under **Housing opportunities in the community**
 - Young people in need of housing support have a lack of viable housing options to support their needs.
 - Young people often want to live with people their own age.
 - However, this proposal will most likely cause the closure of the only 18+ young persons supported housing project in the city of Exeter and surrounding districts.

The Full Report, Section 7: Financial Considerations

- (7.1) Factually incorrect. The point describes the Column in the Options tables as a “breakdown of the financial impact of the options. The column gives absolutely no regard to any other factor or any other costs other than the contribution cost. That’s not a breakdown of the “financial impact of the options” by any stretch of the imagination.
- (7.2) Factually misleading. Again, the data is not taking into consideration the costs of NOT having these services in the 2nd half of the year. Where is that in the current budget for Option 1 as recommended?
 - Additionally, the costing set out within the options tables fail to take any account of D&C inputs as none have been invited. It is possible that any extension costs under consideration may not need to be direct proportionate % of the current £1.454M annual price. It should be feasible to explore reductions in the figures and arguably this should have been an exercise initiated by DCC with stakeholders if not completed by now.
- (7.3) This is already spent, and it’ll stop being spent in 5 weeks? How is this to be monitored closely or indeed mitigated?

The Full Report, Section 8: Legal Considerations

- (8.2) Whilst a statement, even a very condescending statement such as this, is not necessarily factually incorrect, there is no justification or explanation as to what the legal challenges were and how they have been dismissed. The Health Inequalities argument has not been addressed, despite it featuring in hundreds of consultation responses.
- The report has not clearly defined or shown, preferably with examples, who DCC believe is legally responsible for the provision of care and support to those unable to maintain a safe accommodation option in any given scenario. This may appear to be answered within the “updated Equalities Risk Assessment”, but as previously noted this doesn’t exist and isn’t included in the missing Appendix B in the report or on the Council’s web site as the link suggests it is.
- (12.2) Factually questionable and needs specific example. DCC states that it has “committed” to working with the District and City Councils to limit the impact of the recommendation. How has the Council already committed to help districts mitigate the impact of the recommendation, specifically in regard to the millions of pounds of additional costs that the Districts and City Councils have evidenced they will face?
- (12.3) No current plans are in place for assessment of unmet need, although the Council claim that there will be none. Will, or have, the Council therefore committed to ensuring that all current Service Users identified as possibly being in need of Adult Social Care will have an Adult Social Care assessment review before the scheduled contract end date in 9 weeks’ time to ensure sufficient care measures are in place?

What do the Experts Say about the proposal?



Responses from the District and City Councils

East Devon District Council

Summarised the dire situation facing Districts with a responsibility for tackling homelessness; the year-on-year increase in homelessness figures and the challenging housing market which continues to exacerbate this crisis.

The report explains that this is a different set of challenges than Supported Housing provision. It states that there is already a severe lack of specialised supported housing available to Districts and where an individual's issues are more than can be solved by a roof over their head; then supported housing is the only viable option for Districts to use.

They explain the pathway and function of each of the supported housing projects and how it meets a wide range of needs due to the way that they operate together as a pathway which has been developed over many decades to be an extremely efficient system.

The implications are clear in the response which is that, should the proposal to cease this funding stream go ahead, already high and escalating numbers of people in homeless and rough sleeping situations would increase significantly. Removing a model and pathway that succeeds in improving people's lives from desperate situations within an already hazardous environment where there is a recognised shortage of services and available, attainable accommodation would have a devastating effect on both the individuals and local services.

The report outlines in detail the destructive impact that ceasing this funding will have on them as a District, making preventing homelessness impossible and costing all of Devon a vast amount of money and suffering.

East Devon suggests the minimum compromise that could be seen as acceptable would be to retain the supported accommodation as it is, with provision of floating support for those parts of Devon that have no supported accommodation available. It also suggests that this funding should be devolved to the Local Districts to implement.

Teignbridge District Council

Teignbridge, similarly to East Devon, outline the devastating impact that these cuts will have upon their ability to prevent homelessness in their District. They point out that this is not just about providing a housing duty but that many individuals require specialist support for the housing intervention to be in any way successful. To not provide this simply creates more homelessness and more cost to other services which Devon County Council are statutorily obliged to cover.

Alongside this, Teignbridge point out that the data within the impact assessment is not accurate and cannot be used to defend the decision, citing many examples.

They point out that they have been in discussion with DHLUC who confirm that there is no government funding that would alternatively provide for the removal of this contribution.



Teignbridge also state that Devon County Council's claims that they consulted with all Local Authorities ahead of the consultation is false, and that no Local Authority had been invited to any such discussion prior to the consultation release.

Teignbridge's initial calculations are that this will cost Teignbridge District Council alone, well over £470,000 per year in increased costs to just manage the impact on temporary accommodation.

Teignbridge suggest that the minimum compromise that could be accepted would be for a gradual reduction in the funding over a longer period of time, whilst alternative plans could be developed to avoid a major crisis for districts and for County. It also suggests that this funding should be devolved to the Local Districts to implement.

Exeter City Council (ECC)

Exeter City Council submitted a very detailed 11-page response which included a vast amount of data, much of which has been redacted for no apparent good reason in the Freedom of Information request.



Exeter
City Council

ECC point out that in 2014 when this contract was commissioned, the specification was very specific and also recognised the fact that the cohort identified were experiencing homelessness as *"not just a housing issue, but something inextricably linked with complex and chaotic life experiences"* and it was a requirement for providers under the contract to have access to accommodation in order to bid for and align support hours to housing units.

ECC point out the fact that this year, due to all the current societal issues present following a pandemic and a cost-of-living crisis there is **the highest number of unique rough sleepers EVER recorded on the streets of Exeter. A shocking 224 individuals.**

ECC quotes both the conservative manifesto of 2019 and the 2022 Ending Rough Sleeping for Good Strategy which both state that "working together"; identifying Local Authorities, Voluntary, Community and Faith based organisations, was the way in which this would be achieved.

ECC point out that those now approaching them are in crisis, their needs are complex and require a multi-agency approach to solve their circumstances of which just a part is "homelessness".

ECC state that these proposed cuts will "exacerbate budget pressures for both County and partners (including other statutory partners) and will render "unnecessary" costs on emergency interventions and short-term impact measures.

ECC point out that the information provided in the impact assessment and consultation is at least 4+ years out of date and bears little resemblance to the current services provided. It also notes that the impact assessment was undertaken in isolation, has no assessment of current needs, no financial planning and no undertaking towards equality duties and no reference to key stakeholders including District Authorities, Mental Health Services, Police, Primary and Secondary Healthcare Services.

ECC suggest that no cuts are made until opportunities to explore alternative funding options for services under this contract can be undertaken.

DEVON DISTRICT COUNCILS

The City and District Councils also responded in a joint paper to Devon County Council. The response reported on the impacts it would have on all districts which included:

- East Devon District Council
- Exeter City Council
- Torrington District Council
- North Devon District Council
- Mid Devon District Council
- South Hams District Council
- West Devon Borough Council
- Teignbridge District Council

The response states that on 22nd February District Council CEOs were notified simultaneously that a public consultation had been launched on the proposal to end funding of the countywide homelessness accommodation support services. No prior alerts or wider stakeholder discussion preceded this public announcement.

Since 2018 no dedicated resource has been put into adequate contract monitoring by Devon County Council.

Since 2018 Devon County Council has sought to devolve the funding to districts. Last year the plans were unexpectedly suspended by Devon County Council without reason provided.

All districts report that these cuts *“will more than likely result in significant increases in homelessness across each Devon district; with numerous households and individuals at high risk of returning to rough sleeping and street homelessness. Such circumstances are known to drive up incidences of demand and admission to emergency healthcare and blue light services, causing both higher direct service costs as well as wider costs to local communities and the public purse.”*

Without good explanation, data was redacted from these reports in the Freedom of Information request documents published that would otherwise have been able to show the number of individuals who were receiving support via this contract for mental health, substance misuse, trauma, criminal justice compared to how many had Adult Social Care packages of care. Which would have helpfully shown how the services directly reduce the cost of Adult Social Care spending. This data has been removed by Devon County Council's Access to Information department.

However, as the redaction was rather random in the numbers it blocked out, the report could still show that of 152 households in receipt of the prevention contract, only 10% were open to Adult Social Care and only 6% were in receipt of an enabling care package.

The Joint Districts report gave clear evidence of the financial impact on districts of the proposed cuts.

In Exeter the calculated minimum net cost per annum of rehousing arrangement from this cut, for just the current service users within YMCA, Gabriel House and Floating Support tenancy loss to be **£1,450,000**. (*Which is just £5,000 short of the entire cost of the contract for all of Devon!*)

In Teignbridge the calculated minimum net cost per annum of rehousing in their district would be **£555,000**.

The Joint Districts point out that the immediate housing cost to just these 2 districts is £2,000,000 which is already above the proposed “saving” of £1,455,00 by cutting this preventative funding contract.

There are of course six other districts in addition to these two.

The Joint Districts concur that *“the proposal implies that Devon County Council consulted with each Local Authority ahead of this consultation through its housing forum meetings. No District Local Authority has been invited to any such discussion prior to the consultation release.”*

The Joint Districts say that the impact assessment and the consultation imply the withdrawal of support funds does not relate or equate to the loss of actual accommodation or bed spaces. Their report explains that this is not the case as the majority of the hostel accommodation relies on these contractual hours as part of their core sustainability model. This was supported by the original Devon County Council tender specification for this contract which required accommodation to be specifically cited as the leading eligible factor enabling providers to bid.

It is the Joint Districts understanding, having been in discussion with the providers on the contract, that services and accommodation would be unable to continue accommodating service users without the support funding.

The report also notes that the impact assessment implies that all households are single people and the Joint Districts point out that this is incorrect. Their report states that many households including couples and families have complex needs and trauma that requires additional support.

The report says that there is no clear data to properly inform the impact assessment to ensure that Public Sector Equality Duties will be met. They point to clear evidence based on the needs and the definition by the Department of Health of “a vulnerable adult” showing that it is highly likely that the majority of clients would meet the definition.

The Joint Districts point out a significant risk in the loss of YMCA Exeter for young people’s housing and the impact this will have on Care Leavers being unable to access young people’s supported accommodation and progress through a pathway to independence. It points out the extreme lack of young person’s supported housing available across Devon.

The Joint Districts ask a number of questions of DCC, particularly as to how the decision to cut this preventative funding has been made in comparison to other areas of Adult Social Care funded endeavours. It also asks for the Impact Assessment which is shown to be based on inaccurate and vastly outdated data and incorrect in many vital areas to be jointly reassessed with partners which to date has not been done.

It asks Devon County Council to jointly assess mitigation options including alternative remodelling of the contract to minimise and protect key services and find a workable solution.

A Selection of responses from Regional & National Agencies with Homelessness Expertise

Public Health Devon

Public Health Devon’s response recognises that this contribution is to support of individuals *“whose homelessness is not just a ‘housing’ issue, but something that is inextricably linked with complex and chaotic life experiences, that can lead to disproportionately poor health and wellbeing, high levels of health and social care need and cost”.*



Public Health Devon



Public Health Devon’s response includes a Risk Assessment which is states it was asked to carry out on behalf of Devon County Council.

The risk assessment confirms that a large risk factor is that *“ceasing preventative support will increase the client groups’ risk of exploitation (and risk of homicide) including drug related, criminal and sexual exploitation due to the complex lives and needs of the people making use of the service that will no longer be supported.”* They score this Risk’s likelihood of occurring as 3 out of 5 (Very Likely), and its impact level as 4 out of 5 (Very High).

In the box marked Mitigation, it writes: *“ASC (Adult Social Care) has not published this – it is likely that these client’s complex and interlinked needs would fall below the very high social care thresholds. Signposting to alternative services is different to the offer the hostels provide.”*

Public Health Devon’s response listed a wide range of repercussions to other services delivered under Public Health including critical work on Substance Misuse stating that it will *“Adversely impact on accessible provision of substance misuse services and support, particularly to those most vulnerable: - Reduced access to drug and alcohol treatment services; [and cause] Inappropriate referrals”* and result in the *“reduced effectiveness of treatment for the client group affected.”*

Public Health’s response also refers to the MEAM Coalition with the New Economics Foundation having completed a robust quantitative analysis and arriving at the conclusion that the **local cost of 1 complex rough sleeper is in excess of £100k per year.**

Public Health also conclude that this proposal *“will likely result in the reduction of spaces housing providers will be able to cater for, making more people homeless and increase risks of drug related [crime], criminal, and sexual exploitation.”*

Bournemouth Churches Housing Association (BCHA)

BCHA response explains that their Gabriel House Project houses and supports 42 Rough Sleepers and that the removal of this funding contribution would make them unviable and therefore they would close. This would result in 42 Rough Sleepers returning to the streets. Based on the MEAM Coalition with the New Economics Foundation robust quantitative analysis, as quoted by Public Health above, this could therefore cost Devon County Council up to £4.2 Million.



Homeless Link

Homeless Link’s response highlights many best practice documents, explains that those documents have come out of this Conservative government and then clearly show how this decision contradicts them all.



It provides evidence, taken from recognised sources, to show how Supported Housing reduces costs in the NHS, Social Care and Criminal Justice System and explain that taking it away increases the cost to all of these areas beyond the smaller cost of having it in place. It also shows that Supported Housing *“makes a considerable contribution to the strategic aims and statutory duties of these services”*.

Homeless Link then provides information from a calculation by the organisation Crisis, showing that removing this funding will cost Devon far more than it saves.

Sanctuary Supported Living (SSL)

Sanctuary Supported Living's report points out that the funding contribution has already been decreasing year on year due to having been frozen for 5 years and that there are no further savings of efficiencies to be made.



Sanctuary points to calculations made by the National Housing Federation of the cost of homelessness to other Statutory services which clearly evidences that the cost to those services far outweigh the saving made by cutting £1.5 Million from Homeless Prevention.

SSL point out that in the impact assessment, Devon County Council state the contract is supporting "about 250" people however SSL report that alone they are supporting 227 at the time of writing their report. **This shows that the information in the consultation, in the impact assessment and in the reports to the Members of the Council to be completely inaccurate and false.**

SSL's report tried to show how those supported under this contribution cannot be simply *"housed by the districts"* by showing how many people in their client group suffered issues such as ASB, Falls, became missing people, Self-Harmed, attempted Suicide, were part of violence and aggression, had to be admitted to hospital, or even died, however for the majority of the figures were redacted from the information provided through the Freedom of Information request by Devon County Council. There appears to be no logical reasoning for the redaction of this data.

Similarly, their report attempts to show how successful they have been in reducing these issues and achieving positive move on, however again many figures in the data have been puzzlingly redacted even though this is completely anonymised data.

SSL point out that in 2014 Devon County Council seemed to be able to recognise the *"inextricable"* link between housing and support in supported accommodation and the parts that both county and district have to play to enable this successful model to operate. Now, however that learning appears to have disappeared.

SSL demonstrate the correlation that removing this funding will directly and immediately result in increased in ASB, Drug Dealing, Violence, Sexual offences, substance misuse and death, to name just a few.

SSL outline that there is no coherent plan for removing this funding and the resulting chaos and that September 30th 2023 is not sufficient time to manage this cessation safely.

Cardon Banfield Foundation Policy Centre (CBF)

CBF summarise that the withdrawal of this funding with no alternative plans will result in the closure of the services due to financial unviability and result in the loss of quality of life for those receiving the services, increase homelessness and cause greater costs for Devon County Council and the taxpayer.



Cardon Barnfield Foundation outline clear cost analysis of removing the cuts based on National Housing Federation's research and that these costs will fall directly to the Adult Social Care budget, Police and NHS. The quantified estimation is at £40,000 per person per year. Devon County Council estimated that there were "about 250" people supported by this contract (although evidence has shown there are at least twice this amount). But 250 multiplied by £40,000 per year is £10 Million per year.

CBF's response refers to research carried out by the Local Government Association last year in 2022, which found that Councils that invested in Homeless Prevention like the ones DCC want to cut, achieve the following:

- In Leeds, a programme achieved a saving of £8.17 for every £1 spent on Homeless prevention support.
- In Cornwall, Prevention and Engagement Outreach saved £10.91 for every £1 spent on Homeless prevention support.

CBF points out that *"whilst prevention may not be a statutory duty, improving health and reducing health inequalities are. Thus, slashing funds for these services which support those who often have ill health (alongside poor mental wellbeing), seems to create the risk that this proposal implicates Devon County Council in not fulfilling their statutory duties."*

CBF notes that Devon County Council state that *"this contract does not contribute towards buildings and accommodation, or any housing management activities and service charges"* but state that **this is not correct as it implies that removal of support funding from supported housing would have no impact on its viability**. CBF conclude that services would close to the current service users, due to unviability, if the funding for support was removed causing all those accommodated to become homeless along with a large number of people whose tenancies would break down within a short space of time without support, also causing them to become homeless.

CBF describe the mitigations in the proposal as *"sparse"* and *"inadequate"* relying on either a delay in the decision to cut the funding, or an untested hope that Devon County Council could secure a bid from Central Government Funding sources.

Cardon Barnfield Foundation strongly recommend the proposal to be rejected and go on to offer their time to assist Devon County Council and relevant Devon based homelessness organisations in devising a suitable model to ensure the continuation of these vital services. It states in its final line *"A complete abandonment of these services cannot be permitted to happen."*

Westward Housing Association (WHA)

WHA explain that they accommodate 23 people at Alexandra house and provide floating support to another 132 people. Giving more evidence that Devon County Council's statement that only *"about 250"* people benefit from service under this contribution to widely inaccurate.



WHA outline the effective way that they prevent additional cost to the police and the NHS through the service they provide. They state that the loss of their services would result in a large increase in rough sleeping, and anti-social behaviour in the middle of an area that requires its tourism to sustain itself, as much of Devon does.

It explains that those people that use its services are not able to be provided for with a simple housing duty by the district but require specialist additional support to be successfully housed and prevented from homelessness.

WHA call for a minimum of the contribution to be continued for the rest of the financial year to give the provider time to work with the district on alternative possibilities, or at least to manage the rehousing process. They also strongly advocate the devolution of the funding to the local districts.

It completes its report with comments and contributions from current services users who explain how much the service has helped them in their lives and situations.

YMCA Exeter

YMCA Exeter submitted a detailed and comprehensive response across 13 pages.



The response outlines the failures of the consultation process to give accurate data, or to engage with providers properly leading to them having to request a meeting with Devon County Council officers rather than it being proactively set up by them. It also points out that little regard was given to the effect on service users who were left to be informed by providers that their services may be shut down and may likely result in their homelessness. Whilst other consultations sent stamped addressed envelopes out to service users to request feedback, and apparently actively sought to target those who would be affected by the cuts, all this was promised but never occurred in any way for the 18+ contract.

YMCA Exeter also point out that Devon County Council seemed to actively “hide” the consultation from the public by first making it “online only” and then not referring to it, publicising it or even mentioning it in newsletters or social media. Even when providers publicly messaged Devon County Council on social media platforms requesting it to be publicised, these requests were refused/ignored.

YMCA Exeter points out that the data in the consultation and impact assessment is widely inaccurate and that due to Devon County Council not performing its contract management duties for over 5 years the numbers presented were vastly incorrect and gave a false and misleading representation of all providers within the consultation.

YMCA Exeter sets out the financial implications of cutting prevention work based on its own service as an example. Through this it could clearly show that it’s work prevents £924,000 of expenditure from Devon County Council’s Adult Social Care Budget by way of its £157,000 contribution. It showed that that more expensive option would also not provide as wide a service as currently provided to its service users; basing the alternative on between 4 and 20 hours of ASC care package per week per young person (dependant on level of need) compared to the **up to 81 hours per week it currently provides**.

YMCA Exeter showed that it’s service currently provides all of its services to effectively transform the lives of the **85 young people who live in it’s supported accommodation at any one time for a cost of just £35 per week (£5 per day) per person** and asked if Devon County Council if it had considered this Value for Money as part of its consideration in the proposal to cut the funding to services.

YMCA Exeter asked why the Impact Assessment had no assessment of the cost of the proposed cuts increasing costs to any other Statutory services such as Police, A&E departments, GPs, Cleansing and Sanitation of the city centre, Mental Health Services or Safeguarding or to the local business and night-life of Exeter that would all be negatively affected by the sharp increase in homelessness caused by these cuts.

YMCA Exeter pointed out that the majority of its young people would require a funded package of support if it were to no longer provide its preventative services from either Adult Social Care or similar Statutory Provider (i.e., Children’s Services) and that the cost of these individual packages would far outweigh the current contribution amount (by many times over).

CoLab

CoLab outlined that homelessness and the demand for homelessness services has increased “relentlessly” over the past 3 years and that robust analysis has shown that Mental Health and Addiction are the main drivers for homelessness. Therefore, homelessness is not a “housing” problem but a complex combination of Health Care and Housing.



The response rebuts the proposal’s implication that it is not a cut to “bricks and mortar” (housing) and clearly identifies how the loss of support funding would make many providers unable to continue to provide accommodation services to the same cohort of people.

The response highlights that this proposal directly and disproportionately affects those with the greatest Health inequalities in Devon and that this would be a serious neglect of Devon County Council’s statutory duties. It compromises Government commitments and statements to end rough sleeping and highlights that Devon County Council’s impact assessment states that it will “*not improve the social, environmental and economic wellbeing of the county*”.

The response highlights the need to work in a joined-up way with partners and highlights the parallel with the “Everybody In” Agenda which showed that “*treating homelessness as a health issue*” can result in the achievement of significant results.

A Case Study to illustrate the point

Case Study of YMCA Exeter and Care Experienced Young People

If we take just **one client group** of **one provider** in this consultation: **Care Experienced Young People and YMCA Exeter**.

Today, YMCA Exeter has 54 Young People who are Care Experienced and under the age of 25, with the majority having moved into YMCA Exeter from Children’s Services either at 17 years of age or at the point that they reached their 18th Birthday. As the 18+ Homeless Prevention Service caters for this client group along with others who are older or who are not Care experienced, Children’s Service aren’t required to pay for those placements for those young people post 18 years of age. The high-quality support service at YMCA Exeter reduces the intervention required by Children’s Services. This is a great win for Statutory funded services as otherwise there is a requirement to both house and support the young people in their placements.

If YMCA Exeter didn’t exist? Each young person would first need to be housed. This would most likely be done through a private rented arrangement. As private renting doesn’t qualify for Exempt Housing, this would need to be funded by Children’s Services themselves. They may be able to have their young person claim LHA in some circumstances but if not the rent for 1 bed accommodation (if you can find it) is around £800 pcm, before bills. LHA is only £570 pcm in total, so even if our young person could claim benefits, they’d still need a top up from Children’s Services of at least £230 per month to cover the rent. Children’s Services would also need to consider how they would assist the young person in paying their bills.

At YMCA Exeter the young person can expect up to 81 hours of quality support available to them each week as well as groups, work experience, activities, employment mentoring, wellbeing intervention, to name but a few.

Children's Services couldn't hope to fund this number of hours, or overnight supervision. Currently this contract pays YMCA Exeter £35 per week (£5 per day) per person. That would enable Children's service to provide 4 hours of support each week.

That of course, would not be sufficient to cover their Corporate Parent Statutory responsibility, so we if assume that each young person would receive 10 hours per week in order to be able to successfully manage living independently in private accommodation, pay bills, shopping, maintaining employment or education and ensuring good support networks with friends, being safeguarded from others and themselves and everything else you can think of that needs to be managed for a young care leaver. 10 hours seems like the absolute minimum.

- 10 hours at £25 per hour (we'll allow that £25 to include all staffing costs, on costs, equipment, travel, training, sickness, holiday, etc) equals £250 per week per person. So that is immediately **£215 more expensive per person, per week.**
- Then there are 54 of those young people. **£215 X 54 = £11,610 per week** (alternatively this contract cost £35 X 54 = £1,890 per week) so the cost is 6 times more.
- If we compare that to the year cost for these 54 young people, we have **52 weeks X £11,610 = £626,940**
- If we don't remove the contract, it will cost £98,280.

In this single area of the contract alone, of one provider, cutting the 18+ Prevention contract **wastes £528,660 of direct Statutory funding.**

I'll remind you that we've not yet added on the Housing Costs we calculated earlier. *(It's another £9,600 per person for rent alone though, if you were wondering)*

An Appraisal of the 5 Options from DCC

Overview of Options:

DCC's option tables represent a mixture of misleading comments, outright false statements and a Financial "overview" that looks at nothing other than how much of this contribution is / or isn't cutback.

Over the next few pages we've outlined the False Statements, the Misleading Statements and helped show the "pros" and "cons" with some colour to try to make it a bit clearer. Our Financial Overview looks at wider implications of the cuts that DCC have continually ignored or refused to acknowledge.

But some highlights:

- Devon County Council have said that they'd be in the vast minority (an outlier) if they continued funding it and that no other districts fund this work (although then go on to say "the ones that do...". We can give you **factual** data on which two tier authorities do and do not [in this simple table](#). We assume this information was not included in the DCC report as it would show that the statements they were making to be untrue.
- Devon County Council have continued to ignore the overwhelming evidence that has been provided to them by recognised sources of evidence and research about the **increase in costs** they would face both directly to Adult Social Care and to the wider services of the County throughout the report.

- They have not refuted or presented any evidence to the contrary of this wide body of evidence which would be expected in a report on the consultation responses that contained hundreds of these examples to be considered.
- Public Health Devon have reported in their consultation response, which was a copy of the Assessment they carried out at Devon County Council's request, that **the funding of "other services" that Devon County Council point to in their report will be made massively ineffective by the removal of this contract** as the services, statutorily funded by Devon County Council, rely on the framework of Supported Housing provision to operate.
- Devon County Council try to imply that this contract is taking money away from those who are eligible for Adult Social Care Services. **This is not the case at all.** The contract works to provide for those, who would most likely require Adult Social Care services in a cost effective and preventative model. This way more Adult Social Care funds are saved to be directed at those with other Adult Social Care needs. In reality, the opposite of Devon County Council's rhetoric is true: **removing** this contract will be taking money away from Adult Social Care which could otherwise be utilised for care services.

Option 1: Cease the 18+ homelessness prevention contribution and contract on its expiry – 30th September 2023

Of course, this is DCC's preferred option because despite the overwhelming evidence that this contract actually saves both ASC and wider services a vast amount more money than it costs, in a simplistic mind it appears to "save" the most. If this is the option chosen at Cabinet on the 23rd August, then Providers, County and Districts will have 5 weeks to assess the needs and rehouse hundreds of people, which is impossible to do legally or ethically. Equally, Providers will have 5 weeks to initiate redundancy procedures which again is not possible within the timeframe.

This option ignores every bit of feedback from the public, from experts in the sector and will undoubtedly result in the decision being called back by Devon County Councillors and lead to providers initiating Judicial Review proceedings.

There is no compromise or "working with" the Districts in this option as every District and City Council has said that this option would be completely unworkable for them. To take this option then would be to go against many regulations that call for cooperation between Districts and County, some of which the County Council have quoted in their own report.

Conclusion: Completely unworkable and unjustifiable

Option 2: Reverse the proposal and continue funding £1.45m annually.

In the light of all the evidence of how this contract saves money and the financial and personal negative impact it will have on Devon, this option makes sense as it is one of many that gives more time to review the implications and data that has been presented. It is clear that DCC Officers have not so far investigated this as their report refutes none of the claims of the many experienced agencies who have presented evidence and data to back their claims. It is not, however, the preferred option of all the respondents of the consultation who would prefer to see this funding devolved to the Districts to manage, as they understand the needs of their local areas and the value of the work funded by the contract.

**Conclusion: Reflects the Data, evidence and responses from Devon Citizens and National Experts.
Doesn't fulfil ALL the wishes of District and City Councils or providers.**

Option 3: Extend the funding for the remaining 2023/24 financial year and cease on 31/3/2024.

This is a stop gap option which eventually has all the longer-term negatives of Option 1 (increased cost to Devon, etc) but at least gives Providers and Districts the opportunity to investigate immediate alternatives or provides enough time to mitigate some of the massive issues presented by Option 1, those being assessing, rehousing and redundancy proceedings.

Conclusion: Completely unjustifiable but at least gives some time to mitigate some issues.

Option 4: Taper the funding over a period of time before ceasing.

This option gives a more realistic timeframe to the devolvement of the work. During a longer period, services would be reducing their provision and clients will be reassessed for Adult Social Care Packages where they previously were being catered for. This would give time to see the impact of these cuts, and when those costs inevitably do rise to impact DCC as the evidence suggests, there may still be time to reverse the decision and prevent massive financial and personal cost.

Conclusion: Workable Solution with more time to study impact and change course if required.

Option 5: Re-establish proposal to devolve funding to District/City Councils, rather than directly to the Providers (and continue to fund).

This option contains the preferred route highlighted by Districts and Providers that the funding be devolved to Districts. This would need to either be a continuous funding arrangement, or one limited by time (in the example of the DCC Option 5 this might be 3 years) or it could be linked to the tapering Option 4. This also removes DCC's concern about having to manage the administration of this contract, although that has been happily ignored by them for 5 years anyway.














Conclusion: Workable Solution with time to study impact and change course if required along with Districts administering the funding directly (which was a preferred option of all districts and providers)

From the responses to the consultation, the recommendation of the order of options would be:

- 1) Option 5
- 2) Option 2
- 3) Option 5 in combination with Option 4
- 4) Option 4

On the following pages, we outline the options as presented by Devon County Council and the accuracy of the statements made within them:

Option 1: Cease the 18+ homelessness prevention contribution and contract on its expiry – 30th September 2023 – as per consultation proposal. Workwith District and City Councils and providers to find alternative funding sources to discharge their statutory homelessness duties.












Service provision for people with Care Act 2014 eligibility	Partnership Working	Promoting Independence	Listening to consultation feedback
<p>Council Adult Social Care funding can be targeted to those with Care Act eligible needs in line with the Council statutory duties.</p>  <p>Supports financial sustainability of the Council.</p>  <p><i>(Research says otherwise.)</i></p> <p>The Council does not receive any funding from Government for homelessness prevention.</p>  <p>The consultation highlighted a potential increase in demand for services across the health, care and housing system... <i>(yes it did)</i></p>  <p>...which we are working collaboratively to address. <i>(no you aren't!)</i></p> 	<p>Housing and Homelessness is a statutory duty of Housing Authorities, not the Council.</p> <p>Districts have access to central government funding and are best placed to align this funding to local strategic plans to improve the approach to preventing homelessness.</p>  <p><i>(We have shown these monies are already allocated for the next 2 years and do not fund current provision...)</i></p> <p>Brings the Council in line with most other local authorities who do not directly fund homelessness prevention.</p>  <p><i>(55% of two-tier councils fund homelessness support and prevention. This table proves that.)</i></p> <p>The Council will continue working with Districts to secure more funding into Devon to enable them to fulfil their statutory duties to prevent and relieve homelessness.</p> 	<p>Supports intent that the prevention of homelessness is best determined locally, tailored to local need and allows for the pooling of available resources.</p>  <p><i>(Districts may well be best placed, but there are no additional resources.)</i></p> <p>There is a risk that the multi-occupancy hostels may close because of insufficient staffing levels. Mitigations include ensuring there are planned moves for individuals.</p>  <p><i>(In Option 1 there is NO POSSIBILITY of mitigation in the timeframe suggested.)</i></p> <p>The Council will continue to invest in support for people across multiple areas of their lives to prevent, reduce and/or delay the escalation of need and enable recovery.</p>  <p><i>(PHB have stated that these investments will be ineffective if contract is cut.)</i></p>	<p>The majority of consultation responses advocated for the continuation of funding.</p>  <p><i>(All consultation responses have therefore been ignored if Option 1 goes ahead.)</i></p> <p>Providers asked for the contract to be varied to at least the end of the financial year 23/24 to allow time to mitigate risks.</p>  <p><i>(This option therefore ignores this request, creating significant issues with moving on tenants and for redundancy periods; some YMCA staff have 14 years' service so redundancies will cost significantly.)</i></p>

Option 1: Cease the 18+ homelessness prevention contribution and contract on its expiry – 30th September 2023 – as per consultation proposal. Work with District and City Councils and providers to find alternative funding sources to discharge their statutory homelessness duties.

Financial Impact		
23/24	24/25	25/26
Cost: <i>(spent on this Prevention Contract)</i> £727,000 (part year effect)	Cost: <i>(spent on this Prevention Contract)</i> £0	Cost: <i>(spent on this Prevention Contract)</i> £0
Cost: £4,848,082 (as a result) Made up of: Part year costs from September 2023 not budgeted for = £302,170 increase to drug and alcohol services £1,958,687 to NHS and Mental Health £1,677,225 Criminal Justice £910,000 increase in adult social care or Children's Services	Cost: £9,696,165 (as a result) Made up of: £604,340 increase to drug and alcohol services £3,917,375 NHS and Mental Health increase £3,354,450 to Criminal Justice System £1,820,000 increase in adult social care spend or Children's Services	Cost: £10,253,773 (as a result) Made up of: £634,557 increase to drug and alcohol services £4,113,244 NHS and Mental Health increase £3,522,172 to Criminal Justice System £1,983,800 (minimum) increased adult social care or Children's Services

These Figures have been calculated using the Local Partnerships, jointly owned by the Local Government Association, HM Treasury and the Welsh government. The costings were carried out by PricewaterhouseCoopers LLP (PwC) as part of a commissioned piece of work in February 2018 by CRISIS. [You can view the screenshots of the Spreadsheet in this section of this report.](#)

Option 2: Reverse the proposal and continue funding £1.45m annually.

Service provision for people with Care Act 2014 eligibility	Partnership Working	Promoting Independence	Listening to consultation feedback
<p>The contribution will continue to be a service for people irrespective of CareAct 2014 eligibility.</p>  <p><i>(All projects have well defined criteria for eligibility as a prevention measure to reduce Statutory Social Care spending significantly.)</i></p> <p>Limits the ability of Council Adult Social Care funding to be targeted to those with Care Act eligible needs in line with DCC's statutory duties.</p>  <p><i>(No the opposite is true: by saving money with prevention you have more money to spend in ASC.)</i></p> <p>Does not support financial sustainability of the Council.</p>  <p><i>(Prevention proven to reduce financial burden as per LGA's own report.)</i></p>	<p>District/City Councils may ask for a long-term commitment to funding from the Council.</p> <p><i>This doesn't fit within Option 2 and is more aligned to devolution option 5.</i></p>  <p>Governance and performance management arrangements would need to be established and would require ongoing Council staff resource.</p>  <p><i>(This hasn't happened for a number of years and the work needed to agree arrangements with just 5 providers would be minimal.)</i></p> <p>Likely to require re-commissioning as outside of the permitted contract duration and extensions, requiring Council staff resource.</p>  <p><i>(DCC's Strategic Procurement Policy clearly shows that this isn't necessary. Please see notes on the following page for Option 2)</i></p> <p><u>The Council would be an outlier in directly funding homelessness prevention</u></p>  <p><i>(This statement is completely false. Please see our table of two-tier authorities that proves this.</i></p> <p><i>Of the 20 other two-tier councils 45% don't fund homelessness prevention anymore but 55% still do. That's not an "outlier"!)</i></p>	<p>Consultation responses give examples of how people have been supported to be as independent as possible through local homelessness support of which the Council contribution forms part.</p> <p><i>(and so removing it would impact this negatively!)</i></p>  <p>Current arrangements are not enabling District Councils to find more creative ways of preventing homelessness, aligned to Government 'Ending Rough Sleeping for Good strategy' and supporting funding.</p>  <p><i>(LA's have shown that they are doing all they can including working with providers to source additional units, but funding for support services is not abundant from central government.)</i></p> <p>Districts are best placed to align the funding they receive in line with their statutory duties, to local strategic plans to prevent homelessness.</p> 	<p>The majority of consultation responses advocated for the continuation of funding.</p>  <p><i>(This option is in line with 100% of consultation responses, so choosing this option would show that you have listened to the voices of the Citizens of Devon and the wider Expert advice.)</i></p>

Option 2: Reverse the proposal and continue funding £1.45m annually.

Financial Impact

23/24	24/25	25/26
Cost: £1.454m	Cost: £1.454m	Cost: £1.454m

Notes:

DCC’s Strategic Procurement Policy states that reviews can include consideration of the use of these methods of procurement where Services consider open competition to be inappropriate:

1. Contract extensions or renewal without re-tendering
2. Single tenders from specialist or solitary traders
3. Negotiated tenders
4. Partnership/PFI arrangement tendering in accordance with paragraph 2.21 above.

Furthermore Part 5e of the constitution: Code of Business Conduct Procedures for Tenders and contracts says: 3.8 The following factors are examples of circumstances which might justify an exemption for this type of contract:- i) there are no other providers who would be able to provide the service at the time of renewal; or ii) the service is provided by a voluntary, charitable or not for-profit organisation that has made a substantial investment in the service and where market testing has established that there is no other provider who could offer similar investment and that there would be no financial advantage to the Council in tendering the service, or iii) the funding which is provided to a voluntary, charitable or not-for-profit organisation through a contract helps support the general activity of the organisation without which the organisation’s viability might be at risk, and its closure would be to the detriment of the local community, or iv) disruption to service users and/or the market would result from a tendering exercise which would outweigh any financial advantage to be gained from undertaking such an exercise, and 3.9 In all cases where such an exemption is sought evidence will need to demonstrate that the contract is providing good value for money.

Considering all 5 providers on this contract are Charities or not-for-profit organisations then re-commissioning wouldn’t be necessary.

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Option 3: Extend the funding for the remaining 2023/24 financial year and cease on 31/3/2024.

Service provision for people with Care Act 2014 eligibility	Partnership Working	Promoting Independence	Listening to consultation feedback
<p>Limits the ability of Adult Social Care funding to be targeted to those with Care Act eligible needs in line with the Councils' statutory duties this financial year.</p> <p>Fact Check False</p> <p><i>(To say that this entire contract of £1,500,00 "Limits the ability" of a total Adult Care Budget of £339,302,000 is false, even before the argument that prevention saves money.)</i></p> <p>The consultation highlighted a potential increase in demand for services across the health, care and housing system ... <i>(yes it did)</i></p> <p>Fact Check Accurate</p> <p>...which we are working collaboratively to address. <i>(no you aren't)</i></p> <p>Fact Check False</p> <p>Does not support financial sustainability of the Council this year.</p> <p>Fact Check False</p> <p><i>(All evidence provided so far shows that it does more than pay for itself and if cut will add significant costs to DCC.)</i></p>	<p>Allows Districts and Providers more time to explore options to manage the change.</p> <p>Fact Check Accurate</p> <p>The Council will continue working with Districts to secure more funding into Devon to enable them to fulfil their statutory duties to prevent and relieve homelessness.</p> <p>Fact Check Misleading</p> <p>As we are outside of the permitted contract duration and extension period any subsequent extension period would need to be at a length agreed by <u>both parties</u>, requiring Council staff resource.</p> <p>Fact Check False</p> <p><i>(This contract has been rolled on year on year since 2017 and it was never an issue then. It is 5 LETTERS! All of which are already written, and you just have to change the dates!)</i></p>	<p>Consultation responses received from people give examples of how they have been supported to be as independent as possible through local homelessness support, of which the Council contribution forms part.</p> <p>Fact Check Accurate</p> <p>Current arrangements are not enabling District Councils to find more creative ways of preventing homelessness, aligned to Government 'Ending Rough Sleeping for Good strategy' and supporting funding.</p> <p>Fact Check False</p>	<p>The majority of consultation responses advocated for the continuation of funding.</p> <p>Fact Check Accurate</p> <p>Providers asked for the contract to be varied to at least the end of 23/24 to allow for a managed change.</p> <p>Fact Check Accurate</p>












Option 3: Extend the funding for the remaining 2023/24 financial year and cease on 31/3/2024.

Financial Impact

23/24	24/25	25/26
IndicativeCost: £1.454m	IndicativeCost: £0.00	IndicativeCost: £0.00
	Cost: £9,696,165 (as a result) Made up of: £604,340 increase to drug and alcohol services £3,917,375 NHS and Mental Health increase £3,354,450 to Criminal Justice System £1,820,000 increase in adult social care spend or Children’s Services	Cost: £10,253,773 (as a result) Made up of: £634,557 increase to drug and alcohol services £4,113,244 NHS and Mental Health increase £3,522,172 to Criminal Justice System £1,983,800 (minimum) increased adult social care or Children’s Services

These Figures have been calculated using the Local Partnerships, jointly owned by the Local Government Association, HM Treasury and the Welsh government. The costings were carried out by PricewaterhouseCoopers LLP (PwC) as part of a commissioned piece of work in February 2018 by CRISIS. [You can view the screenshots of the Spreadsheet in this section of this report.](#)

Option 4: Taper the funding over a period of time before ceasing. The financial impact outlined is indicative only as the development of a taper plan would be developed with Devon's District Councils and Providers.












Service provision for people with Care Act 2014 eligibility	Partnership Working	Promoting Independence	Listening to consultationfeedback
<p>The contribution will continue to be a service for people irrespective of CareAct 2014 eligibility.</p>  <p><i>(All projects have well defined criteria for eligibility as a prevention measure to reduce Statutory Social Care spending significantly.)</i></p> <p>Limits the ability of Adult Social Care funding to be targeted to those with Care Act eligible needs in line with the Council's statutory duties.</p>  <p><i>(To say that this entire contract of £1,500,00 "Limits the ability" of a total Adult Care Budget of £339,302,000 is false.)</i></p> <p>Does not support financial sustainability of the Council.</p>  <p>All evidence provided so far shows that it does more than pay for itself and if cut will add significant costs to DCC.</p>	<p>Gives time for Providers and District Councils to support a managed change to new arrangements.</p>  <p><u>The Council would be an outlier in directly funding homelessness prevention over the next few years.</u></p>  <p><i>(55% of 2 tier county councils currently funding homelessness prevention with many committed through until 25/26. False Statement.)</i></p> <p>The consultation highlighted a potential increase in demand for health, care and housing services, ... <i>(yes it did)</i></p>  <p>...which we are working collaboratively to address. <i>(no you're not)</i></p> 	<p>Current arrangements are not enabling District Councils to find more creative ways of preventing homelessness, aligned to Government 'Ending Rough Sleeping for Good strategy' and supporting funding.</p>  <p><i>(LA's have shown that they are doing all they can including working with providers to source additional units, but funding for support services is not abundant from central government.)</i></p> <p>Consultation responses received from people give examples of how they have been supported to be as independent as possible through local homelessness support, of which the Council contribution forms part.</p> 	<p>The majority of consultation responses advocated for the continuation of funding.</p>  <p>Providers and District/City partners have asked that the funding be extended and to work in partnership on a proposed way forward.</p> 

Option 4: Taper the funding over a period of time before ceasing. The financial impact outlined is indicative only as the development of a taper plan would be developed with Devon's District Councils and Providers.

Financial Impact		
23/24	24/25	25/26
IndicativeCost: £1.454m	IndicativeCost: £727,000	IndicativeCost: £0.00
	<p>Cost: £4,848,082 (as a result)</p> <p>Made up of: Part year costs from September 2023 not budgeted for = £302,170 increase to drug and alcohol services</p> <p>£1,958,687 to NHS and Mental Health</p> <p>£1,677,225 Criminal Justice</p> <p>£910,000 increase in adult social care or Children's Services</p>	<p>Cost: £10,253,773 (as a result)</p> <p>Made up of: £634,557 increase to drug and alcohol services £4,113,244 NHS and Mental Health increase £3,522,172 to Criminal Justice System £1,983,800 (minimum) increased adult social care or Children's Services</p>

These Figures have been calculated using the Local Partnerships, jointly owned by the Local Government Association, HM Treasury and the Welsh government. The costings were carried out by PricewaterhouseCoopers LLP (PwC) as part of a commissioned piece of work in February 2018 by CRISIS. [You can view the screenshots of the Spreadsheet in this section of this report.](#)

Option 5: Re-establish proposal to devolve funding to District/City Councils, rather than directly to the Providers (and continue to fund).

Service provision for people with Care Act 2014 eligibility	Partnership Working	Promoting Independence	Listening to consultation feedback
<p>The contribution will continue to be a service for people irrespective of Care Act 2014 eligibility.</p>  <p>Limits the ability of Adult Social Care funding to be targeted to those with Care Act eligible needs in line with the Council's statutory duties.</p>  <p><i>(This statement is so false we've now taken to striking it out!)</i></p> <p>Does not support financial sustainability of the Council.</p>  <p><i>(Again, this statement is so false we've now taken to striking it out! No evidence has been provided by DCC refuting the many research evidence-based documents showing the cost savings.)</i></p>	<p>Discussions to devolve the funding took place between 2019-22 with no agreed way forward around funding split, and future delivery of support.</p>  <p><i>(Districts report that DCC ended the discussion without notification.)</i></p> <p>District/City Councils may ask for a long-term commitment to funding from DCC.</p>  <p><i>(The request we understand was for 3 years of funding to be assured. In Option 5 that is what you are offering and so this would most likely be acceptable to Districts.)</i></p> <p>Governance and performance management arrangements would need to be established and would require ongoing County Council staff resource.</p>  <p><i>(No that's what devolution brings! That is the districts issue. DCC admin would be minimal.)</i></p> <p><u>The Council would be an outlier in directly funding homelessness prevention.</u></p>  <p><i>(False statement, struck out!)</i></p>	<p>Consultation responses received from people give examples of how they have been supported to be as independent as possible through local homelessness support, of which the Council contribution forms part.</p>  <p>Supports intent that the prevention of homelessness is best determined locally, tailored to local need and allows for the pooling of available resources.</p>  <p><i>(Districts may well be best placed, but there are no additional resources.)</i></p>	<p>The majority of consultation responses advocated for the continuation of funding.</p>  <p>Some Provider and District Councils requested this option through their response.</p> 

Option 5: Re-establish proposal to devolve funding to District/City Councils, rather than directly to the Providers (and continue to fund).

Financial Impact

23/24	24/25	25/26
Cost: £1.454m	Cost: £1.454m	Cost: £1.454m

These Figures have been calculated using the Local Partnerships, jointly owned by the Local Government Association, HM Treasury and the Welsh government. The costings were carried out by PricewaterhouseCoopers LLP (PwC) as part of a commissioned piece of work in February 2018 by CRISIS. [You can view the screenshots of the Spreadsheet in this section of this report.](#)

DCC's "alternative funding" options reviewed....



In 3.7 of the report, DCC suggests a list of Government Funding available to District and City Councils as “alternative funding” options. These are listed as being:

Affordable Homes Programme	This is a Homes England fund for capital costs to build social housing. It doesn't include Supported Housing and it is strictly for Capital Costs only, so it wouldn't be any use for Support Funding.	X
Staying put and Staying Close	This funding is for eligible Care Leavers only and may have been a useful fund for the Young People affected by the cuts – however as the application window for this fund closed (rather ironically) on the day that all providers and districts were notified of the cuts (22nd February 2023) it isn't much use to us now.	X
The Night Shelter Transformation Fund	Closed in July 2022 having distributed all of it's £9.88 Million country wide.	X
Single Homeless Accommodation Programme (SHAP)	SHAP is a DLUHC and Homes England fund designed to bring online new Supported Accommodation (as Central Government and most everyone understands how valuable it is). The fund is not for revenue funding existing projects but to create new projects that worked with existing ones to create a better “pathway” for homeless people to eventually move on from Supported Accommodation. Exeter, Torbay and Plymouth are all already involved in SHAP funding bids to create new projects but the loss of the existing projects will greatly hamper these plans. DCC also say that they have been working with Districts on accessing this fund, however no districts can confirm this to be the case.	X
Supported Housing Improvement Programme (SHIP)	This fund closed in Autumn 2022 and so is no use. DCC did work with South Hams and West Devon Councils to secure some funding from SHIP in November 2022, however this wasn't used to fund supported housing but to fund the local Housing Benefit Department to “crack-down” on disreputable providers trying to fund support payments out of Housing Benefit and Enhanced Housing Benefit.	X
Housing Benefit, including Enhanced Housing Benefit	Please see above! Whilst Supported Housing is eligible for Enhanced Housing Benefit due to the nature of the client group and the related housing costs of this, funding care and support through Housing Benefit is not allowed and therefore not an option. This is clearly defined in the Housing Benefit guidance for supported housing claims (May 2022) in section 159. <i>“Funding for care, support or supervision is available to supported housing providers through various public bodies including LAs and the NHS. However, care, support or supervision cannot be funded through HB; any charges claimants are liable to pay for care, support or supervision are not eligible.”</i>	X

Drug and Alcohol treatment	We are not aware of what fund is being referred to specifically here?	X
Domestic Abuse Act 2021	The Domestic Abuse Act 2021 placed new duties on local authorities across England to ensure that victims of domestic abuse and their children can access the right support in safe accommodation when they need it. DCC have stated that "housing" is the duty of Districts. Whilst Exeter City Council (for example) received £33,267 from this fund, Devon received £1,425,843. Is there a suggestion that this money is to be passed across to the districts?	?
Charitable funds and grants brought in by organisations, including volunteer workforce	Many providers are also Charities and work hard to already fundraise for their work and are hugely thankful for the willingness of the Devon people to volunteer their time. This is not however a valid way to run a service and neither is it an "alternative to government funding".	X
NHS commissioned initiatives	This is quite vague. If funding via the Integrated Care Boards were a possibility then we would expect that to be a conversation and discussion to have occurred before the announcement of the cuts and lead by DCC who have the statutory responsibility for Public Health.	?
Support to voluntary, community and faith sector workforce	This grant is funding the work of Shelter, Homeless Link and Crisis to provide training, phone advice to homelessness services and night shelters. Homeless Link are being funded to assist Local Authorities to work better with local Charities and Community groups which might be an opportunity for Devon County Council, but it's not funding that can accessed for providing support in supported accommodation.	X

Does Devon County Council get funding to deliver Supported Housing?

DCC says it doesn't, but the **Supporting People programme was launched in 2003 as a £1.8 billion ring fenced grant to local authorities intended to fund services to help vulnerable people live independently. This funded all Supported Accommodation in Devon.**

In 2009, the ring fence was removed from the grant thereby allowing all local authorities to spend their Supporting People allocation as they deemed appropriate. Concerns have been voiced that local authorities are using their Supporting People grant to fund other expenditure – across 152 local authorities, Supporting People funding had been withdrawn entirely from 305 services, and reduced for a further 685 services according to media reports. **The level of the grant was reduced in subsequent years however when this contract was put in place in 2014 the funding across the country was still at £1.59 billion for 2014/15. DLUHC report that this funding hasn't been withdrawn and still makes up part of the payment to Local Authorities. Devon therefore, should still receive this within their funding from Central Government.**

The Housing Minister, Grant Shapps, wrote to local authorities to remind them of the value of Supporting People spending. In an assessment undertaken for the Department for Communities and Local Government in 2009, CapGemini calculated that the net financial benefits of the programme were £3.41 billion.

**No one else does it!
How many 2 tier authorities fund homeless prevention support?**



DCC states that nearly all two-tier councils don't fund homelessness prevention and Devon would be an outlier, is that true? No. It isn't.

Two tier county councils	population	Area in KM		Fund?
Kent	1,581,555	3,544	cut last year	No
Essex	1,489,189	3,459	commissioned prevention in 2022 for a 5 year term.	Yes
Hampshire	1,382,542	3,678	Still committed to £2 million of funding per year.	Yes
Lancashire	1,219,799	2,894	Cut.	No
Surrey	1,196,236	1,663	no contribution	No
Hertfordshire	1,189,519	1,643	no contribution	No
Norfolk	907,760	5,384	Committed to 4 years of funding prevention from 2021	Yes
Staffordshire	879,560	2,620	no contribution	No
West Sussex	863,980		Significant investment in homelessness services of £6 million https://www.westsussex.gov.uk/business-and-consumers/supplying-wscc-with-goods-or-services/existing-procurement-contracts/	Yes
Nottinghamshire	828,224	2,085	Earlier this month contributed financially to bring online 10 new supported accommodation homes for homeless young people	Yes
Derbyshire	802,694	2,547	have a 5-year homelessness strategy through to 2027. - https://democracy.derbyshire.gov.uk/documents/s16338/Appendix.pdf	Yes
Suffolk	761,350	3,800	Cut	No
Lincolnshire	761,224	5,939	Have a 5 year county wide strategy https://democratic.lincoln.gov.uk/documents/s64094/County%20Homelessness%20Strategy%202022-2027.pdf	Yes
Leicestershire	706,155	2,083	Currently in contract until March 2024 but at public consultation to cut with plan to provide support through public health https://surveys.leics.gov.uk/snapwebhost/s.asp?k=168554164803	Yes
Oxfordshire	691,667	2,605	Collective 5 year strategy and county council contribute £904,000 per year to a £3.8mill pot through until 2026 https://mycouncil.oxfordshire.gov.uk/documents/s57560/CA_OCT1921R09%20-%20Homelessness%20and%20Rough%20Sleeping%20Strategy.pdf	Yes
Cambridgeshire	653,537	3,046	appears cut	No
Gloucestershire	637,070	2,653	no contribution	No
Worcestershire	595,786	1,741	no contribution	No
Warwickshire	577,933	1,975	commissioned prevention under 5 year strategy through until 2026	Yes
East Sussex	557,229	1,709	Commissioned floating support	Yes
Devon	802,375	6,564	? To be Decided...	???

11 other Authorities DO fund Homeless Prevention Support and only 9 do not. That is a 55% / 45% split. So more than half DO.

LGA Model Calculation of the savings of the Prevention Contract



The following cost modelling has been provided by the Local Partnerships, jointly owned by the Local Government Association, HM Treasury and the Welsh government. The costings were carried out by PricewaterhouseCoopers LLP (PwC) as part of a commissioned piece of work in February 2018 by CRISIS. The first table sets out the savings linked directly or indirectly to DCC, the second table shows the full system savings.

LGA Model Costings spreadsheet summary	
Savings linked to County Council	
Authority Name:	Devon County Council
Year:	2024
Programme 1:	18+ Homelessness Prevention
Direct Contract Contribution - 2024	
	£ 2024
Total	1,454,000
Reduction in System Costs	
Programme Name	Total Reduction in system costs (£)
Area 1	Increase to Drug and Alcohol Services 604,340
Area 2	Increase to Mental Health Services and NHS 3,917,375
Area 3	Increase in Criminal Justice Spend 3,354,450
Area 4	Increase in Adult Social Care or Childrens services spend 1,820,000
TOTAL	9,696,165
Prevention Cost to Outcome Savings Ratio	
Programme Name	County Council Pound saved per pound spent
18+ Homelessness Prevention	6.67

LGA Model Costings spreadsheet	
Full system savings	
Authority Name:	Devon County Council
Year:	2024
Programme 1:	18+ Homelessness Prevention
Direct Contract Contribution - 2024	
	£
Total	18+ Homelessness Prevention 1,454,000
Reduction in System Costs	
Programme Name	Total Reduction in system costs (£)
Area 1	Homelessness cost avoidance 7,994,613
Area 2	Positive move on and employment savings 4,929,870
Area 3	Preventing use of NHS, MH, CJS and D&A 7,876,165
Area 4	Preventing costs to Adult Social Care and Childrens Ser 1,820,000
TOTAL	22,620,648
Prevention Cost to Outcome Savings Ratio	
Programme Name	Pound saved per pound spent
TOTAL	15.56

Don't let this be the Headline for Devon. We can do better.



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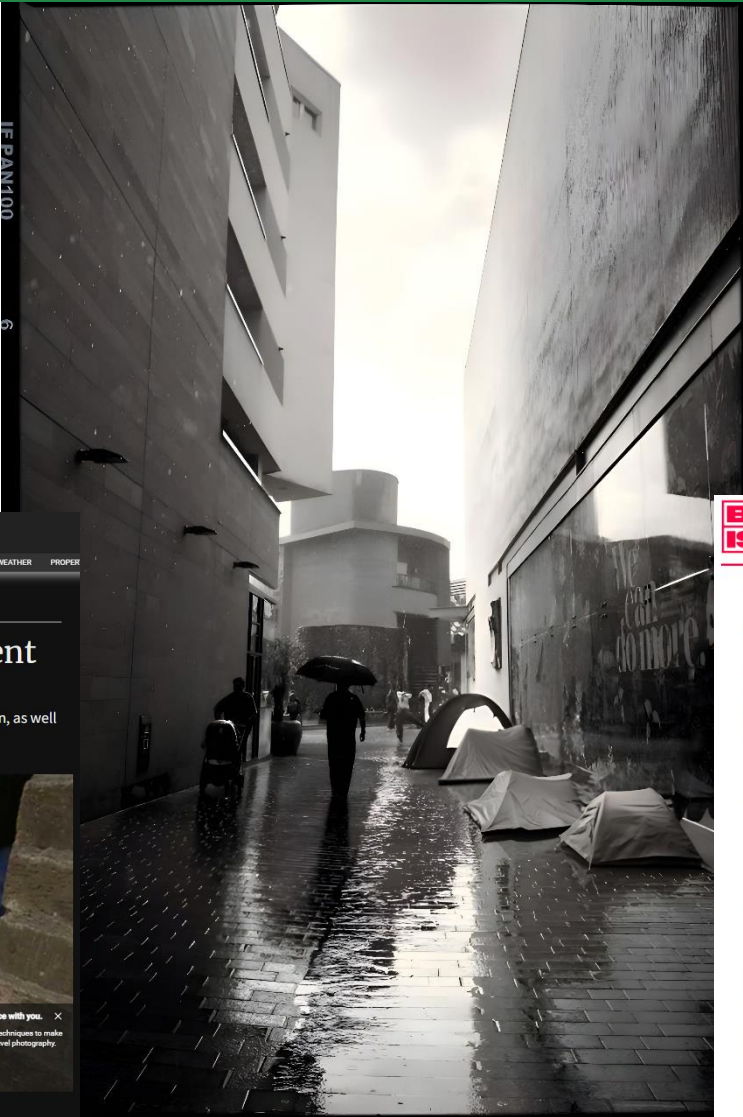
Devon County Council could stop funding homelessness services

3 March

Devon 'can't afford' to help prevent people becoming homeless
Services are provided in hostels in Exeter, East Devon, Torridge and North Devon, as well as through a support service



A rough sleeper - Credit: BBC



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Devon County Council cuts to homelessness services 'disastrous' for people at risk

WEST COUNTRY | DEVON | DEVON COUNTY COUNCIL | HOMELESSNESS | Friday 3 March 2023 at 12:50pm

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'People will die because of this': Devon County Council considers axing £1.5m homelessness prevention funding

Local services and charities have pleaded with the council not to scrap homelessness prevention funding, warning it will see them pay more in the long run

LIAM GERAGHTY | 6 Apr 2023

