

**BOLSOVER DISTRICT COUNCIL**

**Meeting of the Climate Change and Communities Scrutiny Committee on 23<sup>rd</sup>  
June 2025**

**Community Outreach Service Update**

**Report of the Service Manager for Environmental Health**

<b>Classification</b>	This report is public
<b>Contact Officer</b>	Samantha Bentley Service Manager (Residential and Technical Support) Environmental Health

**PURPOSE/SUMMARY OF REPORT**

To provide members with an update on the Community Outreach Service delivered by Environmental Health.

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**REPORT DETAILS**

**1. Background**

1.1 The Community Outreach Service is a well established, longstanding service delivered by the District Council. The links between housing and health are widely understood. A Community Outreach Service is ultimately aiming to assist our residents to live or remain in a safe and healthy home, and to assist their overall health and wellbeing. The service delivers support across the District, to some of our most vulnerable residents, across all tenures. The service delivery focusses on the following themes: -

- Support to ensure residents are receiving the financial help available
- Help with budgeting to reflect residents' individual circumstances
- Referral to debt advice agencies
- Support in tackling food and fuel poverty
- Help to deal with letters and forms
- Referral to specialist agencies to meet the resident's needs
- Help with improving physical, mental and emotional wellbeing
- Close working with partner agencies to support families in need of additional support
- and interventions

- 1.2 Whilst the service is flexible to the needs of residents in need of help and support, the demand for the service has predominantly been around advice and support for financial assistance.
- 1.3 The Community Outreach Service is managed by the Joint Environmental Health Service. There are two FTE Community Outreach Workers covering the whole of Bolsover District. (Two FTEs consist of one full time and two part time officers.)
- 1.4 In 2022, the service was replicated at North East Derbyshire District Council in response to the cost of living crisis. It had been identified by the Joint Environmental Health Service that there was a need for a service equivalent to the Bolsover Community Outreach Service, as its benefits had been visible to the service for many years.

**2. Details of Proposal or Information**

- 2.1 The service receives a substantial number of service requests. In the last financial year, the number of service requests equated to approximately 13 cases per week, between 2 FTEs. The table below demonstrates how the number of cases has risen significantly since the pandemic and also perhaps as a result of the cost of living crisis.

<b>Number of Cases Received by the Service by Financial Year</b>	
<b>Financial year</b>	<b>Number of cases</b>
2018/19	499
2019/20	450
2020/21	438
2021/22	599
2022/23	777
2023/24	703
2024/25	682

- 2.2 Due to the increased demand for the service over recent years, we have had to make minor changes to the service to accommodate the needs. However, during the busiest times, it is likely that people may have to wait up two weeks for an appointment. This does depend on priority and risk, so the most urgent cases are brought forward. Feedback from officers is that on the whole, customers are satisfied with the appointment times being offered. To date we have never received a complaint about the service.

- 2.3 For each case received, there are a wide range of interventions that may be delivered. Cases can often result in more than one visit due to their complexity. Interventions such as assisting in the completion of forms for Personal Independence Payment (PIP) for example, can mean a visit takes approximately 2 hours. Therefore, of the 13 cases received on average per week, there will be cases that are ongoing with multiple interventions and will range from those completed within an hour or two, to those requiring many hours of input.
- 2.4 The most frequently recorded actions during 2024/25 were inevitably 'visit' and 'telephone call'. However, when you consider the types of intervention, most frequent interventions include the following:
- Benefit checks
  - Discretionary Housing Payment applications
  - Council tax
  - Financial advice referral
  - Housing applications
  - Payment Plans
  - Pension credit
  - PIP & DLA
  - Housing benefit & Universal Credit
  - Housing issues

These intervention types demonstrate how the demand for the service is predominantly around finances.

- 2.5 The Community Outreach Service is very well integrated with the range of other council services, as well as external organisations. The strong links mean that cases are easily cross referred, ensuring the customer receives a wide suite of interventions and support, as opposed to a narrow, focussed intervention which deals with only finite matters.
- 2.6 The strong links are evidenced by the source of the service requests, summarised in the table below. As the service is so well established and despite limited publicity, approximately one third of all cases in 2024/25 were self-referrals and the customer has directly requested support. Almost one quarter of cases were referred by external professionals. These are mainly from Derbyshire County Council Adult Care and Children's Services. It is also notable, that approximately 20% of all cases handled are referred from the Housing Department and are council tenants. This is a disproportionate figure when considering the housing tenures across the district. However, it does demonstrate how well the service is integrated and received.

<b>Referrals into the Service during 2024/25</b>	
<b>Source of referral</b>	<b>Approximate percentage of all cases received</b>
BDC Housing dept	20%
Contact Centre	12%
Other internal (Benefits and Env Health)	4%
External professionals inc Social Care, DCC, Community Health, Schools	24%
Self-referral	30%
Other (inc not recorded)	10%

- 2.7 Almost all service requests result in a visit to the home or a meeting place in the community. This face to face support gives the officers an insight into the customer's circumstances, allowing them to identify interventions over and above those initially requested by the customer. This outreach approach brings valuable benefits to the customer and differs from many support services which are more restricted to telephone support. Whilst there are often phone lines for specific services, we find that the clients using this service need the additional support that face to face brings. Often customers struggle to deal with their issues and the prospect of call centres means they disengage further and problems escalate. Unlike some other services which are often simple referral schemes, this service aims to deliver direct support by being present with the customer. The direct support can include assisting in completing forms, handling telephone calls and helping customers better equip themselves to handle their affairs. The case studies attached in Appendix 1 show the breadth and detail behind the Community Outreach Service.
- 2.8 The service is managed by the Home Improvement Team in the Joint Environmental Health Service. The team's duties focus on the health and welfare of residents regardless of tenure. The Community Outreach Service is therefore closely linked with this team. In fact, there are many cases that are shared with other teams in Environmental Health, across the wider housing and public health functions. In particular, the Housing Assistance Coordinator role, which delivers specialist support around energy efficiency and fuel poverty.
- 2.9 A very successful link is that with health and social care. The frequency of referrals from such professionals shows this. However, we suspect that the knowledge and understanding of the service can be patchy across the district and may rely on an individual case worker's knowledge. It is accepted that

promotion of the service could be an area of development going forward. However, this has to be finely balanced with the level of resources, so as not to create a backlog of referrals and mismanaged expectations.

### **3. Reasons for Recommendation**

- 3.1 To provide Members with an update on the progress made by Environmental Health

### **4 Alternative Options and Reasons for Rejection**

- 4.1 N/A

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### **RECOMMENDATION(S)**

1. That the Committee note the report

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### **IMPLICATIONS:**

<b><u>Finance and Risk</u></b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
<b>Details:</b>		
None for this report		
On behalf of the Section 151 Officer		
<b><u>Legal (including Data Protection)</u></b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
<b>Details:</b>		
None for this report		
On behalf of the Solicitor to the Council		
<b><u>Staffing</u></b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
<b>Details:</b>		
None for this report		
On behalf of the Head of Paid Service		

**Equality and Diversity, and Consultation**

Yes  No

**Details:**

The Community Outreach Service helps to protect the most vulnerable residents in our community.

**Environment** Yes  No

Please identify (if applicable) how this proposal/report will help the Authority meet its carbon neutral target or enhance the environment.

**Details:**

In some cases, the Community Outreach Service will refer to other Services, including the Housing Assistance Coordinator, which can assist with affordable warmth and provide advice and support to access home insulation for instance.

**DECISION INFORMATION:**

**Please indicate which threshold applies:**

**Is the decision a Key Decision?**

A Key Decision is an Executive decision which has a significant impact on two or more wards in the District or which results in income or expenditure to the Council above the following thresholds:

Yes  No

**Revenue (a)** Results in the Council making Revenue Savings of £75,000 or more or **(b)** Results in the Council incurring Revenue Expenditure of £75,000 or more.

(a)  (b)

**Capital (a)** Results in the Council making Capital Income of £150,000 or more or **(b)** Results in the Council incurring Capital Expenditure of £150,000 or more.

(a)  (b)

**District Wards Significantly Affected:**

*(to be significant in terms of its effects on communities living or working in an area comprising two or more wards in the District)*

Please state below which wards are affected or tick **All** if all wards are affected:

All

<b>Is the decision subject to Call-In?</b> <i>(Only Key Decisions are subject to Call-In)</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If No, is the call-in period to be waived in respect of the decision(s) proposed within this report? <i>(decisions may only be classified as exempt from call-in with the agreement of the Monitoring Officer)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Consultation carried out:</b> <i>(this is any consultation carried out prior to the report being presented for approval)</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Leader <input type="checkbox"/> Deputy Leader <input type="checkbox"/> Executive <input type="checkbox"/> SLT <input type="checkbox"/> Relevant Service Manager <input type="checkbox"/> Members <input type="checkbox"/> Public <input type="checkbox"/> Other <input type="checkbox"/>	

<b>Links to Council Ambition: Customers, Economy, Environment, Housing</b>
Customers - providing excellent and accessible services Environment - protect the quality of life for residents and businesses, meet environmental challenges and enhance biodiversity

**DOCUMENT INFORMATION:**

Appendix No	Title
1	Case Studies

<b>Background Papers</b>  <i>(These are unpublished works which have been relied on to a material extent when preparing the report. They must be listed in the section below. If the report is going to Executive, you must provide copies of the background papers).</i>

## **Appendix 1**

### **Case Studies**

#### **Case Study 1**

A pension age BDC tenant living alone, was referred to the COS by the local GP surgery for a benefit check. The tenant had expressed difficulty managing his rent and utility bills. He was currently paying full rent and council tax, had lost his winter fuel payment and was suffering anxiety and depression.

COS contacted the tenant to make an appointment for a home visit. The COS established that the tenant's only source of income was his state pension of £198 per week and he was using his savings of around £10,000 to pay his weekly rent, therefore his savings were reducing significantly.

The tenant said he had previously had a joint claim for pension credit and housing benefit with his wife. However, this had ended when she had passed away and he said he did not know he could claim it again.

The COS carried out a full benefit check and established that he was under the threshold and eligible for pension credit and housing benefit and should definitely apply. The COS assisted in completing an online application for pension credit and also an application for housing benefit and council tax support.

During the visit, the COS ascertained that the gentleman was struggling with his mobility and some other health issues and required assistance daily. The COS therefore assisted in the completion of an application for Attendance Allowance whilst there.

#### **Outcome**

In addition to his state pension, the tenant is now receiving pension credit (guarantee credit) of £26.10 per week, housing benefit of £98.00 per week and £23.47 of council tax support per week

The tenant was also awarded £73.90 per week in attendance allowance, which meant that he could then get an additional £82.90 on top of his pension credit because of a disability premium. The overall benefits to the customer were not only a much increased income, but also their general wellbeing. The customer is now able to self-refer into COS at any point with any difficulties or concerns he may have in the future.

## Case Study 2

A customer was referred to the community outreach service from social care when she was three months pregnant. We will refer to her as 'Sarah'. At that time Sarah was homeless, unemployed and sofa surfing with a friend who had two small children and was also receiving support from social care. This was an entirely inappropriate situation for both women and meant that social care were very concerned for the wellbeing of all the children involved. Sarah had previously had a child removed from her care. She was not receiving any DWP benefits and had no income at all, this meant that she was unable to buy food for herself or to make any contribution to the house where she was staying.

The first action that COS addressed was helping Sarah to apply for the appropriate benefit, in this case Universal Credit which would give her an amount of money to live on. COS also supported her in getting the guidance required to complete a Bolsover District Council housing application, as well as offering her support in looking for privately rented accommodation. Unfortunately, Sarah was unable to find suitable accommodation before her baby was born, and due to this her baby was removed by social care shortly after the birth. At this point, Sarah's social worker referred Sarah back to the Community Outreach service with the hope that given support to improve her financial and housing situation, Sarah could help to improve her situation to the extent of gaining back custody of her son.

At this point, COS worked alongside BDC housing department and Sarah was offered a property. COS ensured that Sarah added her housing costs onto her Universal Credit claim. However, Sarah was not coping financially. This was due to the flat being a two-bedroom property and as Sarah was under occupying, she was not receiving all the housing costs. She now had rent arrears, and other debts. Payment plans were arranged for her to pay her council tax, rent arrears, TV licence and her water rates. Sarah had made good progress with these, making payments to address them, however she needed guidance on suitable amounts to pay to make all the household payments manageable.

A Discretionary Housing Payment was applied for to help meet Sarah's under occupancy fee which she had to pay until her son returned to her care. This would stop her rent arrears increasing and she could concentrate on reducing these.

Sarah's son was returned to her when he was 6 months old, and COS helped her to ensure that all child related benefits were put in place. COS also applied for a Derbyshire discretionary fund for carpets and other essential items, and this was successful.

To ensure that Sarah stayed on top of her finances, she worked with the COS to do a personal budget plan which would allow her to stay on top of all her bills. Sarah had surplus income at the end of every week which she expressed would be spent on any extra essential items for herself or her son and she would look to saving for the future. We also discussed Sarah's desire to further her education, prepare her CV and look for a career.

Following these interventions, Sarah has kept to payment plans set up for her and fully cooperated at every meeting. Sarah continued to keep custody of her son.