Reference (official use)



### Petitions - submission form

If you wish to submit a petition for consideration by the Audit and Scrutiny Committee, please complete the form below. You are advised to refer to the Guidance Questions and Answer sheet provided.

Details of Prince	cipal Petitioner				
Please enter the The Principal Pet Borders Council	name and contact details of the person raising the petition. itioner must be on the Register of Electors for the Scottish				
wanie.	Jenny Mushlin				
Address:	18 Fleming Place				
	Fountain Hall				
	Galashiels				
Postcode:	TD1 2TA				
Telephone no:	18 CH ( C C C C C C C C C C C C C C C C C				
Email:					

# **Title of Petition and Petition Statement**

Please enter the title of the Petition and a statement to cover the main subject of the Petition or the action you would like the Council to take.

**Title: Welfare Benefits Service Changes** 

## Statement (no more than 250 words):

We, the undersigned require that Scottish Borders Council, in its redesign of the standalone Welfare Benefits Service into the Customer Advice and Support Service must maintain the same standard of service to ensure the most vulnerable and deprived people in the Borders are not unfairly disadvantaged or face inequality of access to support services and income maximisation through benefits.

### We request that SBC:

- Employ Welfare Benefits Assistants or other staff who have a specific remit to assist with initial completion of form applications.
- Regularly monitor and listen closely to Citizens Advice Bureaux on their workload with initial and pre-assessment support, including waiting times for the public to receive support.
- Is able to offer a comprehensive service, giving advice on all aspects of the welfare benefits system - from initial claims to representation at tribunals
- Ensure that home visits are provided, at any stage, for those unable physically or financially to get around (this is not currently recognised in the Equality Impact Assessment)
- Ensure there are sufficient staff resources within SBC for maximization of benefit entitlement in the Borders and to ensure that all receive their right to a fair hearing.
- Acknowledge the error made in not carrying out any public consultation for the changes to the Welfare Benefits Service
- Monitor and report on the impact on the groups with protected characteristics listed as negatively impacted by the Equality Impact Assessment (poverty, age, disability, and we would suggest, those classified as living in remote small towns, accessible rural and remote rural areas)

#### Further information.

Please enter below any measures already taken, or persons/organisations approached to attempt to resolve the issues. Attach additional sheets to this form if required but please note that this information must be limited to no more than 4 sides of A4 paper.

Jenny Mushlin has written, on behalf of The Mental Health and Wellbeing Forum and other Borders Care Voice members to Tracey Logan, Chief Exec (CC'ing Elected Members, MSPs and MPs) and has received a reply, along with a copy of the EIA. However, it was felt that few of the concerns raised - if any - were really taken on board in the response and there were no assurances given about how and when any negative impacts would be monitored and reported. To ensure adequate scrutiny of the decisions around these changes, and in light of a lack of any public consultation, it was agreed to submit a petition to the Audit & Scrutiny Committee. Presentation of petition to the Committee. Please indicate below if you would like the opportunity to make a statement at the meeting of the Audit and Scrutiny Committee when your petition is considered. Whether or not you will be invited to do so will be at the discretion of the Chairman. \*I do/ wish the opportunity to make a brief statement about the petition. \*I would like my deputy named below to make a statement on my behalf. Name of deputy ..... Contact details .....

Signature of deputy.....

\* please delete as appropriate

Signature of	of	Principal	Petitioner.
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If you are satisfied your petition meets all the requirements as stated in the Guidance Questions and Answers please add your signature and date below.

Signature of Principal Petitioner.....

Date 8 4 16 2018

#### Accompanying signatures.

Your petition must be accompanied by at least 10 signatures in total, from persons aged 16 and over, resident in the Scottish Borders. The signatures must be from a minimum of 3 separate addresses.

Please be aware that if the petition is on the agenda for a meeting of the Audit and Scrutiny Committee the names and addresses, but not signatures, of all signatories will be published on the Council website.

	Name	Address	Signature
1	G. N. GISET	STATION ROAD STOW, GALASHIES TRIZSO	
2	M. ROPER	KIECHILL FARM	r.
3	M GREEN	72 WODSTOCK AVE GALASHILLS TRECT	-
4	N. Glandining	3 Walker Street, Innerleithen, EH44 blk	
5	J Smith	Thorn Cottage, Highst Gordston TD4 60E	
6	G. ANDERSON	STABLEGITE CONT	

7	Margaret Mackag	SHUMEHALL HOLDING GLEENLAW TOID bYW	
8	ma garet	36 TRINITU PARK DUNS.	
9	None	Januare Desire	
10	Pot Ecans	Makore Northburn Vino Eyemouth TD14 SBG	

Attach additional sheets of signatures if you wish.

Please submit this form and any additional sheets to:-

Clerk to the Council, Scottish Borders Council, Council Headquarters, Newtown St Boswells, Melrose, TD6 OSA,

or email to:

committeepapers@scotborders.gov.uk

