



Civic Centre
HARTLEPOOL

5 DECEMBER, 2022

Councillors Allen, Ashton, Boddy, Brash, Brown, Buchan, Cassidy, Clayton, Cook, Cowie, Cranney, Creevy, Falconer, Feeney, Fleming, Groves, Hall, Hargreaves, Harrison, Howson, Jackson, Leedham, Lindridge, Little, Loynes, Martin-Wells, Moore, Morley, D Nicholson, V Nicholson, Reeve, Sharp, Smith, Thompson, Tiplady and Young

Madam or Sir,

You are hereby summoned to attend the COUNCIL meeting to be held on THURSDAY, 15 DECEMBER 2022 at 6.00 p.m. in the Civic Centre, Hartlepool to consider the subjects set out in the attached agenda.

Yours faithfully

D McGuckin
Managing Director

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COUNCIL AGENDA



Thursday 15 December 2022

at 6.00 pm

in the Council Chamber,
Civic Centre, Hartlepool.

- (1) To receive apologies from absent Members;
- (2) To receive any declarations of interest from Members;
- (3) To deal with any business required by statute to be done before any other business;
- (4) To approve the minutes of the last meeting of the Council as the correct record;
 - (1) Meeting of Council held on 3 November 2022
 - (2) Meeting of Extraordinary Council held on 23 November 2022
- (5) To answer questions from Members of the Council on the minutes of the last meetings of Council;
- (6) To deal with any business required by statute to be done;
 - (1) Director of Public Health Annual Report
 - (2) Proportionality Review – Report of Monitoring Officer **(to follow)**
- (7) To receive any announcements from the Chair, or the Head of Paid Service;
- (8) To dispose of business (if any) remaining from the last meeting and to receive the report of any Committee to which such business was referred for consideration;

CIVIC CENTRE EVACUATION AND ASSEMBLY PROCEDURE

In the event of a fire alarm or a bomb alarm, please leave by the nearest emergency exit as directed by Council Officers. A Fire Alarm is a continuous ringing. A Bomb Alarm is a continuous tone. The Assembly Point for everyone is Victory Square by the Cenotaph. If the meeting has to be evacuated, please proceed to the Assembly Point so that you can be safely accounted for.

- (9) To consider reports from the Council's Committees and to receive questions and answers on any of those reports;
- (1) Further Periodic Review of the Council's Constitution – Constitution Committee
- (10) To consider any other business specified in the summons to the meeting, and to receive questions and answers on any of those items;
- (11) To consider reports from the Policy Committees:
- (a) proposals in relation to the Council's approved budget and policy framework;
- (1) Housing Revenue Account (HRA) Business Plan Update – Report of Finance and Policy Committee
- (b) proposals for departures from the approved budget and policy framework;
- (1) Seaton Carew Public Conveniences – Report of Finance and Policy Committee
- (12) To consider motions in the order in which notice has been received;
1. A decision on significant new investment into hospital services for Hartlepool and North Tees is imminent, and whatever the outcome we believe that between the two sites, only Hartlepool is fit for longterm future development.

The lifespan of the buildings at North Tees is very short, whereas by contrast Hartlepool's buildings have decades left. North Tees lacks spare land capacity for new development, Hartlepool has plenty of land to allow development to take place.

It is clear that only Hartlepool has the necessary scope for cost-effective development.

Moreover, with ever greater collaboration between health trusts North and South of the Tees, it is vital to secure provision that is balanced and meets the needs of all residents across the area. Locating new hospital services in Hartlepool ensures that balance in the North and prevents the over centralisation of services in the Tees Valley.

This Council therefore resolves to write to both the Secretary of State for Health and the Foundation Trust, in the spirit of cross party unity, to express our united and clear view that:

1. Should a new build development get the go ahead, which would include fully functioning A&E, then it should be at the Hartlepool site.



2. Should such investment not be approved then significant long term investment will still be required, including the provision of a new A&E service, and this should be at the Hartlepool site.

Signed: Councillors Harrison, Brash, Allen, Boddy, Clayton, Creevy, Feeney, Hall, Hargreaves, Howson, Morley, Thompson and Sharp

- (13) To receive the Managing Director's report and to pass such resolutions thereon as may be deemed necessary;
- (14) To receive questions from and provide answers to the public in relation to matters of which notice has been given under Rule 9;
- (15) To answer questions of Members of the Council under Rule 10;
 - a) Questions to the Chairs about recent decisions of Council Committees and Forums without notice under Council Procedure Rule 10.1
 - b) Questions on notice to the Chair of any Committee or Forum under Council Procedure Rule 10.2
 - c) Questions on notice to the Council representatives on the Police and Crime Panel and Cleveland Fire Authority
 - d) Minutes of the meetings held by the Cleveland Fire Authority and the Police and Crime Panel



COUNCIL

MINUTES OF PROCEEDINGS

3 November 2022

The meeting commenced at 6.00 pm in the Civic Centre.

The Ceremonial Mayor (Councillor Cowie) presiding:

COUNCILLORS:

Ashton	Boddy	Brash
Brown	Buchan	Cassidy
Clayton	Cook	Cranney
Creevy	Falconer	Feeney
Fleming	Groves	Hall
Hargreaves	Harrison	Howson
Jackson	Lindridge	Little
Loynes	Martin-Wells	Moore
Morley	Sharp	Smith
Thompson	Young	

Officers: Denise McGuckin, Managing Director
Hayley Martin, Chief Solicitor
Amanda Whitaker, Denise Wimpenny, Democratic Services Team

Prior to the commencement of the meeting, the Ceremonial Mayor referred to the recent passing of Honorary Freeman Alby Pattison. Members stood in silence as a mark of respect.

The Ceremonial Mayor welcomed Councillor Sharp to his first meeting of Full Council since he was elected at the recent Throston by-election.

58. APOLOGIES FOR ABSENT MEMBERS

Councillors Allen, Leedham, D Nicholson, V Nicholson, Reeve and Tiplady.

59. DECLARATIONS OF INTEREST FROM MEMBERS

None.

60. BUSINESS REQUIRED BY STATUTE TO BE DONE BEFORE ANY OTHER BUSINESS

None.

61. MINUTES OF PROCEEDINGS

The Minutes of Proceedings of the Council held on the 29 September 2022, having been laid before the Council.

RESOLVED - That the minutes be confirmed.

62. QUESTIONS FROM MEMBERS OF THE COUNCIL ON THE MINUTES OF THE PREVIOUS MEETING OF THE COUNCIL

With reference to minute 55 concerns were expressed and clarification was sought in relation to a number of issues relating to the establishment of Hartlepool Mayoral Development Corporation. The Managing Director advised that a Members' Seminar would be held on 14 November and she was hopeful that a report would then be submitted to the Finance and Policy Committee and the December meeting of Full Council.

63. BUSINESS REQUIRED BY STATUTE

1. Proportionality Review – Report of Monitoring Officer

The report sought approval of the revised political balance calculations and allocation of seats on Committees in accordance with statutory requirements, following recent changes which had altered the political balance between the Groups. The Proper Officer had been notified in accordance with the requirements set out in the Local Government (Committees and Political Groups) Regulations 1990 that Councillors Thompson and Sharp wished to be treated as members of the Labour Group. Pursuant to Section 15 of the Local Government and Housing Act 1989 the Authority is under a duty to review the allocation of seats to Political Groups as soon as practicable following a change to the membership of a political group

The revised composition of the Council was set out in the report together with the Committees upon which there had been an impact as a result of the review.

RESOLVED, with no dissent –

- (i) That the political balance calculations set out in the report be approved;
- (ii) That the allocation of committee seats to political groups be agreed and the membership of Committees approved as follows:-

Children Services Committee

HPG - relinquish to Councillor Cowie

Labour – Councillors Harrison, Boddy and Sharp

Con/IU – Councillors Groves, Lindridge, Moore

Neighbourhood Services Committee

Labour – Councillors Creevy, Howson, Sharp

HPG – Councillor Jackson

Con/IU – Councillors Cassidy, Moore and Cook

Audit and Governance Committee

Con/IU – Councillors Cowie, Falconer, Loynes, D Nicholson

Labour – Councillors Allen, Creevy, Feeney and Hall

PSF – Councillor Smith

HPG – Councillor Cook

64. ANNOUNCEMENTS

None.

65. TO DISPOSE OF BUSINESS (IF ANY) REMAINING FROM THE LAST MEETING AND TO RECEIVE THE REPORT OF ANY COMMITTEE TO WHICH SUCH BUSINESS WAS REFERRED FOR CONSIDERATION.

None.

66. TO RECEIVE REPORTS FROM THE COUNCIL'S COMMITTEES

None.

67. TO CONSIDER ANY OTHER BUSINESS SPECIFIED IN THE SUMMONS OF THE MEETING

1. Hartlepool Armed Forces Covenant – Progress (2021/22) – Address by the Armed Forces Champion, Councillor Cowie

The report set out a comprehensive update on progress in relation to the implementation of the Armed Forces Community Covenant during 2021/22. The significant progress which had been made, over the previous 9 years, in meeting the objectives and intentions of the Covenant and implementing the measures contained within it were highlighted.

It was recognised that it was important to continue to move forward in identifying service personnel and their needs, looking at how the Authority could work with partners to deliver services and maximise funding opportunities.

A Seaton Carew ward councillor reiterated concerns which she had expressed during the previous Armed Forces Update (minute 52 of the meeting held on 4 November 2021 refers). Full Council was advised that the condition of the Seaton Carew War Memorial Site had not been addressed and continued to be a safety concern to veterans paying their respects, particularly on Remembrance Sunday. The Managing Director advised that an update would be provided to the elected member and expressed apologies for any delay.

The Armed Forces Champion was commended on his update and other Member Champions were encouraged to also submit updates to Full Council.

68. REPORT FROM THE POLICY COMMITTEES

(a) Proposal in relation to the Council's budget and policy framework

None.

(b) Proposal for Departure from the Budget and Policy Framework

None.

69. MOTIONS ON NOTICE

None.

MANAGING DIRECTOR'S REPORT

70. CRUSTACEANS – REFERRAL FROM ECONOMIC GROWTH AND REGENERATION COMMITTEE

During the course of discussions at the Economic Growth and Regeneration Committee on the 18 October, concerns had been reiterated regarding the absence of a voice to represent Hartlepool's fishermen as part of any proposed joint scrutiny arrangements and it was agreed that Redcar and Cleveland's request for involvement would be considered by Full Council.

The Managing Director had circulated an updated report which advised Full Council that she had received clarification from Redcar and Cleveland Council regarding a motion that Redcar and Cleveland Borough Council passed at its meeting on the 14 July 2022. The motion asked the other Tees Valley authorities if they would be supportive of the establishment of a special scrutiny committee from all the Tees authorities to monitor the ongoing situation regarding the mass mortality crustacean event that occurred along the length of the Tees coastline in October 2021. They were now proposing to set up an alternative model and

had invited Councils to be part of a joint working group based on arrangements set out in the report.

Full Council agreed to participate in the joint working arrangement and nominated the following to the working Group:-

Councillor Cook, Chair of Audit and Governance Committee
Councillor Young, Chair of Economic Growth and Regeneration Committee
Councillor Creevy, Mover of Motion
Statutory Scrutiny Manager

It was moved by Councillor Moore and seconded by Councillor Young:-

“That a letter be sent to the Environment, Food and Rural Affairs Committee thanking them for their recommendations and a letter also be sent to the Secretary of State requesting the Minister to accept all the recommendations made by the Committee.”

Following an extensive debate on issues arising from the report, the Managing Director confirmed that participation in the joint working group and nominations to the working group had been agreed, with no dissent. It was reported also that a copy of the outcome of the Select Committee findings be shared with Elected Members following the meeting.

71. COVID UPDATE

The Managing Director reported that it was currently difficult to give a clear indication of the number of COVID cases in Hartlepool due to the current lack of testing. The most appropriate indicators were hospital admissions and deaths. The current seven day case rate is 73 per 100,000 population which was an increase of almost 50% on the rate two weeks previous. In October 1 in 3 cases had been a reinfection, which was comparable to the rates for August and September. Hartlepool's testing positivity rate was at 11.4% in the latest figures (10/10/22). This was up from 3.2% at the beginning of October. Currently Hartlepool averaged around 200 PCR tests a week. Hartlepool has had 0 Covid deaths since August.

Full Council was advised that latest data (17/10/22) for Covid hospitalisations for NT&H NHS Trust are up 59% on the previous week, from 37 to 43. However there were still a low number requiring ventilation. Over 80% of the population had had at least 1 dose, which was comparable to the North East average. However Hartlepool's spring booster uptake is around 75%, which is below the regional average of 80%.

Following presentation of the report, an elected member requested an update on the number of Monkey Pox cases in Hartlepool. The Managing Director undertook to contact the Director of Public Health in relation to the information.

RESOLVED – That the report be noted.

72. RESIGNATIONS FROM COMMITTEE/OUTSIDE BODIES

The Managing Director advised Full Council that she had been informed that Councillor Young wishes to resign from the Constitution Committee and a number of Outside Bodies as set out in the report.

An additional resignation had been received from Councillor Moore who had resigned from the Planning Committee. It was understood that Councillor D Nicholson had been nominated by the Group to replace Councillor Moore on the Committee.

RESOLVED – That the following appointments be approved:-

Planning Committee – Councillor D Nicholson replace Councillor Moore

Hartlepool Power Station Community Liaison Committee – Councillor Brash replace Councillor Young

North Tees and Hartlepool NHS Foundation Trust – Councillor Martin-Wells to replace Councillor Young.

Schools Admission Forum – Councillor Sharp replace Councillor Young

Tees Esk and Wear Valley NHS Trust – Councillor Boddy to replace Councillor Young

That the following vacancies be noted:-

Constitution committee

Northern Consortium of Housing Authorities

Teesside International Airport Consultative Committee

Teesmouth Field Centre

73. PUBLIC QUESTION

None.

74. QUESTIONS FROM MEMBERS OF THE COUNCIL

- a) Questions to the Chairs about recent decisions of Council Committees and Forums without notice under Council Procedure Rule 12.1

It was questioned whether a response had been received from the Member of Parliament to the letter which had been sent inviting her to forthcoming meetings of Policy Committees. It was reported that a response had not been received and it was proposed that further correspondence be sent to the MP.

- b) Questions on notice to the Chair of any Committee or Forum under Council Procedure Rule 12.2

1. Question from Councillor Clayton to Chair of Neighbourhood Services Committee

“Can the chair of neighbourhood services explain why the policy of charging disabled people to park is being pursued?”

The Chair of the Neighbourhood Services Committee responded that he would not be pursuing the policy because there is nothing for him to pursue as the policy had been approved by Full Council in December 2021 and had been implemented in April of this year.

Following the response, Councillor Clayton proposed that the policy needed to be reviewed to explore the legalities associated with charging blue badge holders to park in on-street bays. The Chief Solicitor advised that it was her understanding the Authority could charge for parking on council owned off-street car parks land but would look further into the issues raised.

2. Question from Councillor Howson to Chair of Neighbourhood Services Committee

“At Full Council in December 2021 the Chair of the Neighbourhood Services Committee reported that work would be undertaken by Officers to look at the potential of the online reporting system to give members and the public estimates of when work would be done. There was also a statement to the effect that greater education was needed around fly tipping and litter. Can we have an update on these actions?”

The Chair of the Neighbourhood Services Committee responded that the on-line reporting system had been in place for councillors and the public to use for some time now, and recent training was provided for members this year in May. The system advised users of response times for certain enquiries submitted, and lets the person know when their enquiry has been completed and closed, The Chair encouraged all members and residents to report issues via this system as it helps to build up an intelligence picture with the appropriate council departments.

In relation to fly-tipping and letter, the Chair advised that the Council works hard to educate and prevent these incidents from happening. In the previous 6 months, 5 press releases had been issued as part of a successful media campaign on fly tipping to remind the public that their support was needed to eradicate this problem. It was highlighted that the Council also support a number of individuals/voluntary groups, who support is invaluable. The Chair considered that this demonstrated the positive approach the Council is taking in tackling this issue by working closely with partners and voluntary groups in addressing this problem in a proactive way.

3. Question from Councillor Harrison to Chair of Finance and Policy Committee/SHP

“A question was asked at March's full council meeting relating to Women's Safety in Hartlepool and council sought assurances that work would be extended to support this. I would like to ask that a report describing the various initiatives which have been put into place be brought to an appropriate

committee meeting - and is there any more we as a council can do to support the work which is going on and even add to it?"

The Chair of the Finance and Policy Committee/Safer Hartlepool Partnership reminded the elected member that it had been agreed at Full Council on 24th March 2022 that a report would be presented at the next Safer Hartlepool Partnership meeting on this subject. The Chair confirmed that this did happen, with a report being presented at the meeting held on 18th July 2022. The Chair advised that he could arrange for a copy of the report to be sent to the member by officers.

- c) Questions on notice to the Council representatives on the Police and Crime Panel and Cleveland Fire Authority

None.

- d) Minutes of the meetings held by the Cleveland Fire Authority and the Police and Crime Panel

None.

The meeting concluded at 7.10 p.m.

CEREMONIAL MAYOR

EXTRAORDINARY COUNCIL

MINUTES OF PROCEEDINGS

23 November 2022

The meeting commenced at 6.00 pm in the Civic Centre, Hartlepool

The Ceremonial Mayor (Councillor Cowie) presiding:

COUNCILLORS:

Boddy	Brash	Brown
Buchan	Cassidy	Clayton
Cook	Cranney	Creevy
Falconer	Feeney	Fleming
Groves	Hall	Hargreaves
Harrison	Howson	Jackson
Lindridge	Little	Loynes
Martin-Wells	Moore	Morley
D Nicholson	V Nicholson	Reeve,
Sharp	Smith	Thompson
Tiplady	Young	

Officers: Denise McGuckin, Managing Director
Hayley Martin, Chief Solicitor
Neil Wilson, Assistant Chief Solicitor
Bev Bearne, Assistant Director, Development and Growth
Julian Heward, Senior Communications and Marketing Officer
Denise Wimpenny and David Cosgrove, Democratic Services Team

75. APOLOGIES FOR ABSENT MEMBERS

Councillors Allen, Ashton and Leedham.

76. DECLARATIONS OF INTEREST FROM MEMBERS

Councillor Moore declared a personal interest in Minute 78 referring to the proposal that he be appointed to the Board of the Mayoral Development Corporation.

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77. BUSINESS REQUIRED BY STATUTE TO BE DONE BEFORE ANY OTHER BUSINESS

None

78. TO CONSIDER REQUEST FOR EXTRAORDINARY COUNCIL

The meeting had been convened to consider the following requisition :-

“Hartlepool’s Labour Councillors request an extraordinary meeting of Full Council in respect of the proposal to establish a Mayoral Development Corporation in Hartlepool.

The purpose of this meeting will be to publicly debate all issues related to this issue, seek answers publicly to all questions related to this issue and to pass motions related to this issue as Council sees fit.

Issues for consideration include, but will not be limited to:

- the decision making process for the formation of the MDC,
- the decision making process for the transfer of land that is council owned, owned by other public bodies or owned by the private or third sector.
- the role of planning and the ability of the council to prevent the transfer of this power
- the make up of the MDC board and the membership from the council
- future potential for expansion

The requisition was signed by Councillors Harrison, Brash, Hargreaves, Clayton, Boddy, Feeney, Creevy, Sharp, Howson, Morley, Thompson, Allen and Hall.”

The following motion was moved by Councillor Brash and seconded by Councillor Harrison:-

“That Hartlepool Borough Council objects, in writing, to the Secretary of State for ‘Levelling Up’ in respect to the formation of a Mayoral Development Corporation, unless the following conditions are agreed and written into the corporation’s constitution:

Protection of Public Assets

1. That no public asset can be transferred into the MDC without the agreement of Full Council.
2. That a sunset clause be included so that, unless consent is given for an extension by HBC, the corporation will wind up after 3 years and all assets transferred to the public ownership of the Council.

The Public's Right to Democratic Control

3. That no planning powers will be transferred from the democratic control of the Council.
4. That the Tees Valley Mayor agrees to extend the MDC board to include the Council's deputy leader and the leader of the largest opposition party to enhance democratic accountability.
5. That no future change to the MDC's constitution, boundary or assets can take place without the express permission of Full Council.

Transparency, Accountability, Fairness in Funding Decisions

6. That oversight of how funding is distributed is enhanced via public quarterly reports to the Council's Audit and Governance Committee.

We cannot allow democratic control of Hartlepool and its future to be handed to an unelected corporate board, which removes the rights of residents to shape decisions. We ask all Councillors to defend this right and endorse these red lines to protect our town, our people and our future.

The background and rationale for submission of the motion was detailed by the mover and seconder of the motion referring to the implications of the proposals in their current form and the benefits of the safeguards suggested. Elected Members debated issues arising from the motion. Some concerns were expressed and clarification was sought in relation to a number of issues relating to the establishment of a Mayoral Development Corporation in Hartlepool, the impact as a result and Members debated at length whether the recommendations agreed by Finance and Policy Committee on 21 November, 2022., a copy of which had been circulated in advance of this meeting, provided the necessary safeguards to protect the Council.

Councillor Moore indicated that the report agreed by Finance and Policy Committee provided an overview of the proposed Mayoral Development Corporation governance process together with the next steps and indicated that the report provided the necessary safeguards to address the issues raised by Members.

In accordance with Council Procedure Rule 15.5 of the constitution, a recorded vote was taken on the motion:-

Those for:-

Councillors Boddy, Brash, Clayton, Cook, Creevy, Feeney, Hall, Hargreaves, Harrison, Howson, Jackson, Morley, Sharp and Thompson

Those against:-

Councillors Brown, Buchan, Cassidy, Cowie, Cranney, Falconer, Fleming, Groves, Lindridge, Little, Loynes, Martin-Wells, Moore, D Nicholson, V Nicholson, Reeve, Smith, Tiplady and Young

Those abstaining:-

None

It was announced that the vote was lost.

Following further debate on issues arising from the motion and clarification sought in terms of the legalities of the proposals, it was moved by Councillor Moore and seconded by Councillor Young that the following recommendations agreed by Finance and Policy Committee on 21 November 2022 together with additional recommendation (g) be agreed.

Members are asked:-

- a) To note progress to date.
- b) To note the outcome of the consultation carried out over the Summer of 2022.
- c) Subject to satisfactory safeguards and assurance being agreed and provided for within the MDC Constitution, this report be referred to Full Council to request that the Leader of the Council as Cabinet member for the TVCA be authorised to confirm his consent to the designation of the Hartlepool MDC in accordance with s3 (2) of the TVCA Functions Order.
- d) To note that subject to approval of recommendation (c) above that officers will continue to work with the TVCA to secure written assurances to ensure as far as reasonably practicable that all of the elements set out in the HBC consultation response are adopted.
- e) To note that work will continue with the TVCA to ensure sufficient safeguards are contained within the MDC Constitution a copy of which will be brought back to Members for information.
- f) To note that a further report will be presented to Members regarding any financial or asset implications as part of the second stage of the consultation which will be undertaken by the Secretary of State.
- g) In the event that the Hartlepool Mayoral Development Corporation is wound down, any HBC assets be transferred to Hartlepool Borough Council and that this safeguard be included in the Hartlepool Mayoral Development Constitution.

The recommendations were agreed, with no dissent.

The meeting concluded at 7.05 p.m.

CEREMONIAL MAYOR

COUNCIL

15 Dec 2022



Report of: Health and Wellbeing Board

Subject: DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

1. PURPOSE OF REPORT

- 1.1 To present the Director of Public Health's Annual Report for 2022.

2. BACKGROUND

- 2.1 The requirement for the Director of Public Health to write an Annual Report on the health status of the town, and the Local Authority duty to publish it, is specified in the Health and Social Care Act 2012.
- 2.2 Director of Public Health Annual Reports have over the last five years covered a range of themes from how public health priorities have changed over the past 40 years, the importance of how work and employment influence health and wellbeing, aging well and starting well, obesity and physical activity and Covid-19.

3. PROPOSALS

- 3.1 To publish the 2022 Director of Public Health Annual Report for Hartlepool.
- 3.2 The 2022 Annual Report looks at the whole picture of health in Hartlepool, exploring data, and first hand views from a number of local residents, in relation to three key stages of life: "the best start in life", "living well" and "living well in later life". The report discusses health inequalities, which cause some of the biggest challenges we face, and uses an "average" Hartlepool street of one hundred people to help explain health data. The report ends with what we can do together to help people in Hartlepool live happier, healthier and longer lives.

- 3.3 Following the success of utilising an electronic format and videos in recent years, we are again presenting the report in this format.

4. RISK IMPLICATIONS

- 4.1 There are no risk implications arising from this report.

5. FINANCIAL CONSIDERATIONS

- 5.1 There are no financial considerations arising from this report.

6. LEGAL CONSIDERATIONS

- 6.1 The requirement for the Director of Public Health to write an Annual Report on the health status of the town, and the Local Authority duty to publish it, is specified in the Health and Social Care Act 2012. There are no other legal considerations arising from this report.

7. CHILD AND FAMILY POVERTY CONSIDERATIONS

- 7.1 The Director of Public Health Annual Report briefly describes the scale of child and family poverty in Hartlepool, since poverty is known to have significant impact on health, particularly for children. There are no other poverty considerations arising from this report.

8. EQUALITY AND DIVERSITY CONSIDERATIONS

- 8.1 There are no equality and diversity issues arising from this report.

9. STAFF CONSIDERATIONS

- 9.1 There are no staff considerations arising from this report.

10. ASSET MANAGEMENT CONSIDERATIONS

- 10.1 There are no asset management considerations arising from this report

11. RECOMMENDATIONS

- 11.1 Council is asked to note the report and its conclusions.
- 11.2 Publication of the 2022 Director of Public Health Annual Report for Hartlepool.

12. REASONS FOR RECOMMENDATIONS

- 12.1 Ensures compliance with the statutory duties under the Health and Social Care Act 2012 for the Director of Public Health to produce a report and the Local Authority to publish it.

13. BACKGROUND PAPERS

- 13.1 Director of Public Health's Annual Report for 2022 (**Appendix A**) and Additional Baseline Public Health Data (**Appendix B**) which is also available via a weblink in the main report

14. CONTACT OFFICER

Craig Blundred
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01429 284104



HARTLEPOOL DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2022

START

Introduction by Craig Blundred Director of Public Health for Hartlepool

Hartlepool has many strengths, with many people and organisations keen to work together to improve the wellbeing of the town.

However, people in Hartlepool continue to live shorter lives, and have worse health outcomes, than the average person in England.

By acting on the reasons for this, we can reduce the causes of ill-health and early death (and the causes of the causes) so people can live longer, healthy lives.

The report explores data, and first hand views from a number of local residents, in relation to three key stages of life: “the best start in life”, “living well” and “living well in later life”.

Where possible, the report uses an “average” Hartlepool street of one hundred people to help explain health data.

The biggest challenges we face in Hartlepool are caused by health inequalities. Health inequalities are the avoidable differences in health outcomes Hartlepool residents experience compared with their neighbours, or with other parts of the country. Therefore this report compares health data in Hartlepool with data from the North East and England.

The report ends with **what we can do together** to help people in Hartlepool live happier, healthier and longer lives. This includes acting on the building blocks of health (good housing, food, community, education, work, money and transport), **local information** on **support available to take healthy action** and **support to help with the cost of living**.



Video introduction by Craig Blundred



Living well throughout your life

Welcome to our Hartlepool street – Click on each heading to find out more.



THE BEST START IN LIFE

What the best start in life means

Giving children the best start in life is vital, since experiences during pregnancy and in childhood can significantly affect wellbeing and opportunities over the whole of a person's life and even in the next generation.

Giving children the best start in life involves helping a child grow up healthy and reach their potential. It can include supporting healthy pregnancy, breast-feeding, play, learning, healthy food, good relationships with parents/carers and protecting children from harms (e.g. smoke, alcohol, drugs, serious illnesses and poverty).



Introduction by Nikki Clark, Public Health Practitioner for
Hartlepool Borough Council

The situation in Hartlepool

Detailed data is [available here](#) but some key challenges and positives are noted below:

- Hartlepool has one of the highest rates of child poverty in England. In an average street of one hundred children, 39 are living in poverty. This has increased in the last six years.
- In Hartlepool, more mothers smoking when their baby is born (14 in every one hundred mothers) and lower levels of breastfeeding (25 in every one hundred children at 6-8 weeks) than in the rest of England.
- In an average class of thirty children starting school in Hartlepool, 9 are already overweight or obese. This is higher than in the North East and England. By year six of school, 12 children in an average class of thirty are overweight or obese. A quarter of the class are obese.
- These issues can affect wellbeing in childhood and throughout a person's life. However, we know it is possible to make a difference to the health of children in Hartlepool because there is good news in some measures of child wellbeing. For example, around 95% of children under two years in Hartlepool have been vaccinated against key diseases, fewer people are starting smoking in Hartlepool and fewer under 18 year olds are becoming pregnant.

Every family deserves support to help them make sure their baby grows up healthy and reaches their potential. Examples of support available and what we can all do to give children the best start in life are outlined in the [What we can do together](#) section of the report.



What giving children the best start in life means to Hartlepool mums Meg and Ellie



Another perspective from James Sinclair, Children's Centre Lead for Hartlepool

LIVING WELL

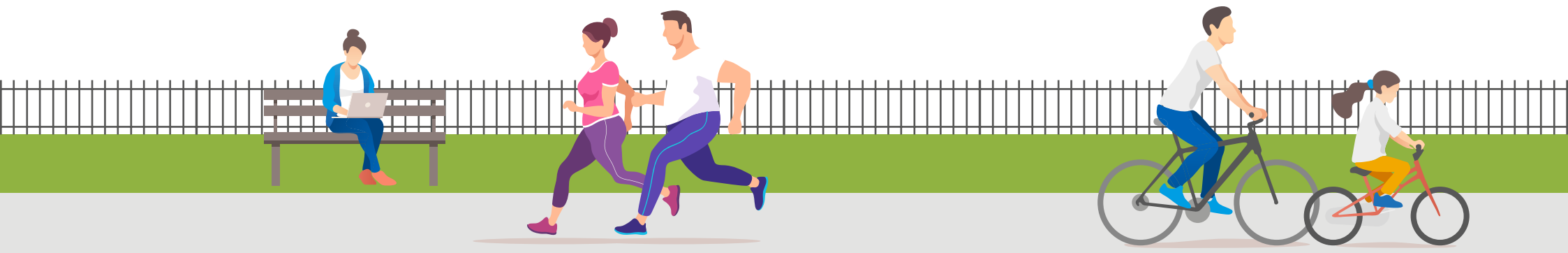
What living well means

Living Well has different meanings for different people. It's about having the opportunities to enjoy life and this is affected by our health.

Our health depends on the building blocks of health such as good housing, food, community, education, work, money and transport. These issues can affect our ability to live well, live healthily and even how long we live.



Introduction by Claire Robinson, Public Health Principal with Hartlepool Borough Council



The situation in Hartlepool

Detailed data is [available here](#) but some key challenges and positives are noted below:

- In an average Hartlepool street with one hundred adults, 16 people smoke, 45 are physically inactive, 73 are overweight or obese. These figures are worse than an average street in England and increase the risk of heart disease or other health problems.
- In Hartlepool people are more likely to die from heart disease at a young age than people in England. Between 2018 and 2020, 325 people died of heart disease in Hartlepool, including 70 people under 65 years old.
- People in Hartlepool are also more likely to die due to alcohol or drug use than people in England.
- Many of the deaths due to heart disease and other causes are preventable. Action to prevent deaths can include improving the building blocks of health, such as ensuring people can afford and access healthy food. Green spaces in the community can also allow people to be more physical active.
- One positive regarding breast screening in Hartlepool was that more than two thirds of eligible women were still screened even in 2021 (when screening was affected by the Covid pandemic). This means that, in the latest data, Hartlepool is performing better than the England average.

More information on screening, other support available and ideas for what we can all do to live healthier, longer lives is outlined in the [What we can do together](#) section of the report.



What living well means to Hartlepool resident Michael



What living well means to Hartlepool resident David



Another perspective from Donna Stone of Hartlepool Community Hubs

LIVING WELL IN LATER LIFE

What living well in later life (ageing well) means

When people retire there is often more opportunity to spend quality time doing activities they enjoy (such as seeing friends and family and doing hobbies). Many older people make a vital contribution to communities as paid workers, volunteers and carers. Our health can have a significant impact on our ability to do these activities.



Introduction by Catherine Guy from the Public Health team at Hartlepool Borough Council



The situation in Hartlepool

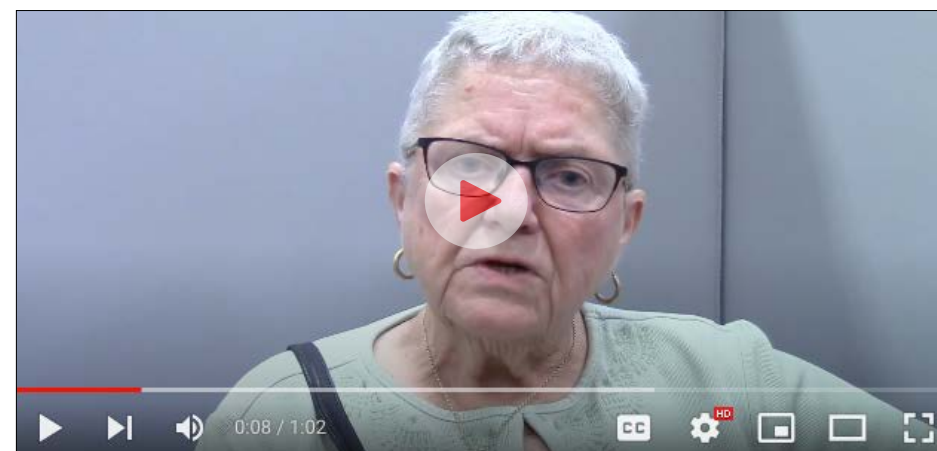
Detailed data is [available here](#) but some key challenges and positives include:

- As people in Hartlepool age, they experience more ill health and die around two years earlier than people in the rest of England.
- Heart disease, stroke and cancer are some of the leading causes of death. In an average Hartlepool street with one hundred people, 4 people are living with heart disease. This is more than in an average street in England. Preventable early (under 75 years) deaths from heart disease and stroke are higher, and rising, in Hartlepool compared with the North East and England.
- People in Hartlepool have also been more likely to catch Covid and die from it than people in England. People living in the poorest areas of Hartlepool were twice as likely to die from Covid as people living in richer areas of Hartlepool.
- Screening for cancer saves lives but not everyone is screened. For bowel cancer screening, 65 in every 100 eligible people are screened in Hartlepool. This has been improving over time and is now similar to the England average.
- Another positive is that both carers over 65 years, and people who receive social care, in Hartlepool felt less lonely than in other parts of England. This may be related to community spirit and the active voluntary sector in the town. Interestingly, older people in Hartlepool are also less likely to be admitted to hospital due to a fall.

A healthy retirement depends on our life experiences throughout our lives but changes at any time can make a difference. Support already available in Hartlepool and ideas for what we can all do to live healthier, longer lives is outlined in the “What we can do together” section of the report.



Friends Pauline and Doreen tell us what living well in later life in Hartlepool means to them



What does living well in later life in Hartlepool mean to Mary?

WHAT WE CAN DO TOGETHER

This report provides a summary of health in Hartlepool and looks at possible reasons why people in Hartlepool have shorter lives and poorer health. However, we also want to focus on what we can all do to improve the health of the town. As a whole town, we can work together to improve the health of our families, friends and community

For example, we can act together to ensure people:

- Live in good housing and can access green spaces nearby in the community
- Have access to good food (e.g. healthy food they can afford in shops they can reach)
- Feel connected with the community and know about opportunities for support (and ways they can contribute)
- Have opportunities for education and work that fit their needs and can increase the prosperity of the town
- Have enough money to live a happy and healthy life
- Can move around the town to access services (including active transport such as walking and cycling safely)

In the short term, we also recognise many people are currently struggling with the cost of living. A list of [support to help with the rising cost of living](#) is available on the main page of the Council website.

It is impossible to list all the opportunities and support available that can help people live well in Hartlepool in this document. However, [Hartlepool Now](#)

also contains a comprehensive, up-to-date, searchable list of local events, information and support (including Community Navigators, Community Hubs and children's centres). Businesses, charities and other organisations can look at the [Better Health at Work Award](#), become "[breastfeeding friendly](#)" and look at other opportunities to improve the health of staff and people they support (e.g. Making Every Contact Count). There is also more information available online about giving children the best start in life, living well and ageing well and new Public Health webpages being developed within the Hartlepool Borough Council website.

Going forward, it is important that we work together with local communities and build on our strengths (such as community spirit and a vibrant voluntary sector) and what we have already achieved to really drive improvements in people's lives.

By working together to make an effective difference to the building blocks of health (such as good housing, food, community, education, work, money and transport) we can help people in Hartlepool live happier, healthier and longer lives.



Conclusion by Craig Blundred, Director of Public Health for Hartlepool

Hartlepool Public Health Baseline Data 2022

Introduction`

People in Hartlepool live shorter lives and have more ill health than people in the North East and England. There are many possible reasons for this starting from before birth and throughout our lives. We can act on causes of ill-health and early death (and the causes of the causes) so people can live longer healthy lives in Hartlepool.

Additional data in this document provides a baseline summary of health in Hartlepool. Where possible, an “average” Hartlepool street of one hundred people is used to help explain health data throughout the life course.

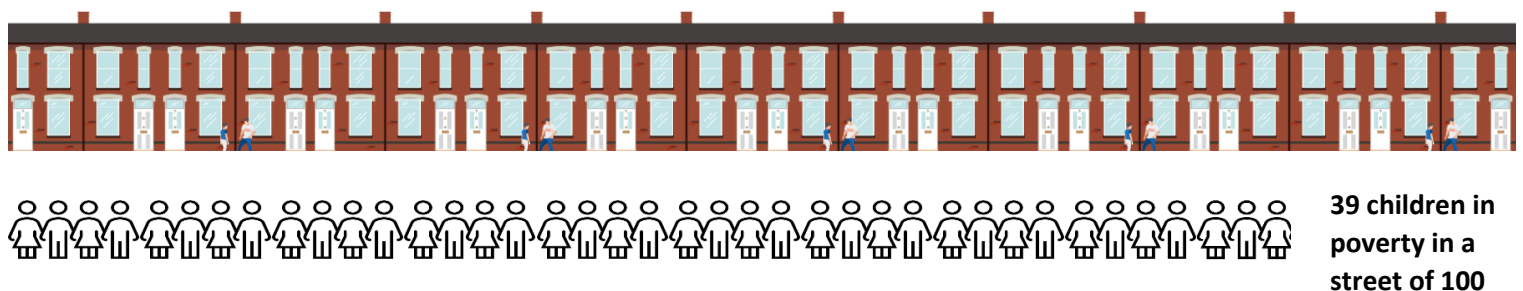
Best start in life

Giving children the best start in life is vital, since experiences during pregnancy and in childhood can significantly affect wellbeing and opportunities over the whole of a person’s life and even in the next generation.

To live healthy, happy, long lives it is important for a family to have the building blocks of health (good housing, food, community, education, work, money and transport) from the start. However, many children are born into families without these resources.

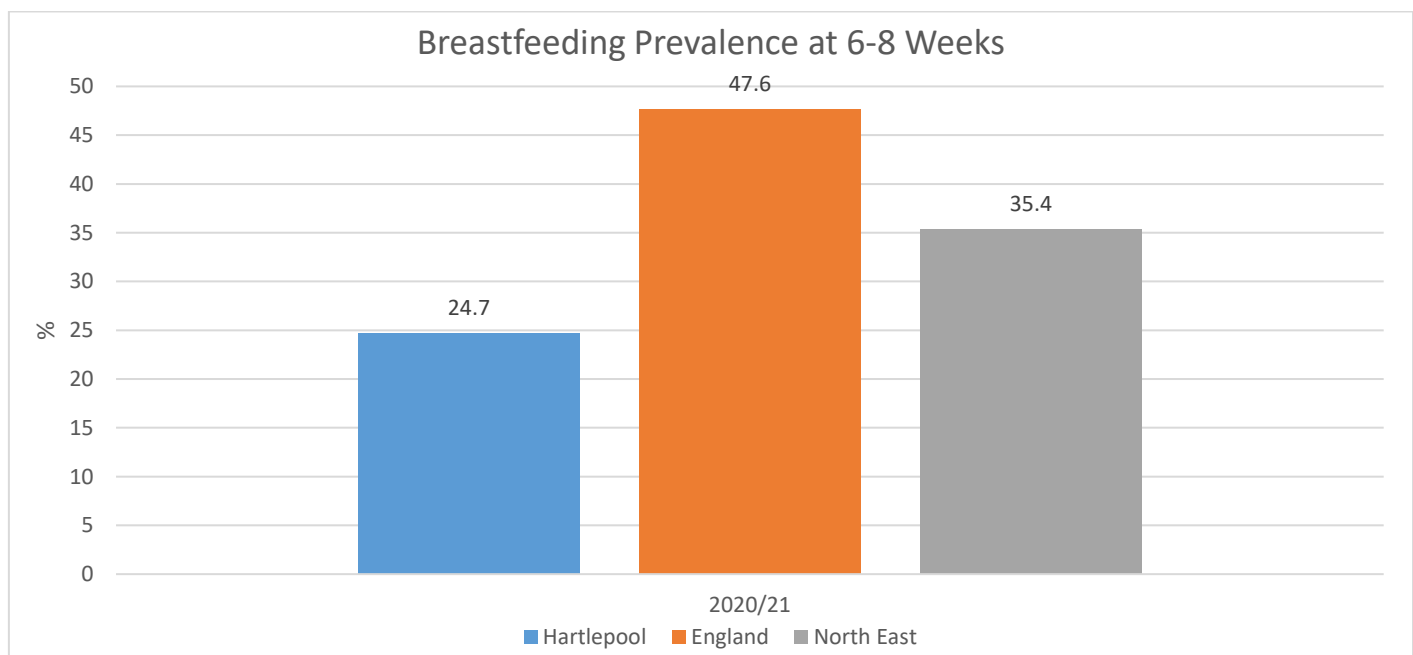
In an “average” Hartlepool street of one hundred children, 39 are in poverty¹. This has increased from 27 in every 100 children in 2014/15.

Number of children in poverty on an “average” Hartlepool street of one hundred children



Smoking in pregnancy and in the home can have significant effects on children’s health. In Hartlepool, 14 in every one hundred mothers are smoking when their baby is born. This is higher than in the North East or England (10 in 100)

Breastfeeding has significant benefits to the health of babies and mothers. However, in Hartlepool, only 25 in every one hundred children are breastfed at 6-8 weeks (compared with 48 in 100 children in England).



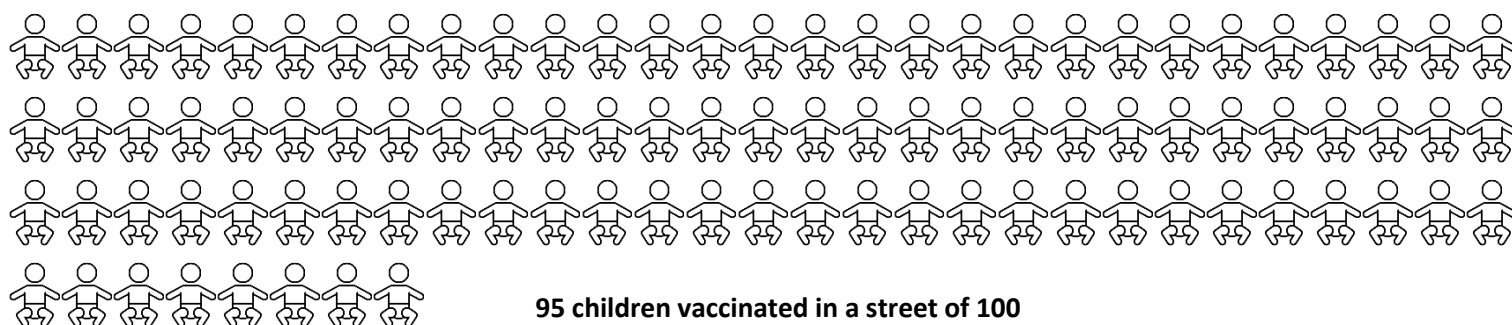
¹ The national definition of poverty is less than 60% of median income. Poverty means lack of resources to have adequate diet/living conditions and participate in society

Immunisations

Vaccines are important to protect against key serious diseases. Vaccines protect the person receiving the vaccine but also, if enough people are vaccinated, reduce the spread of disease and protect people who are too young to have the vaccine or for whom the vaccine is not suitable/effective. The national target for infant vaccines is 95% and Hartlepool is around this figure.

Out of one hundred children under 2 years, 95 have had each of the routine infant vaccines.

Number of children under 2 years in vaccinated on an “average” Hartlepool street of one hundred children



The Spine chart below shows vaccine trends (arrow), coverage and comparison to England (dot for Hartlepool coloured according to whether 95% threshold is met compared to red line for England). Infant vaccines include combined diphtheria, tetanus and pertussis/whooping cough (Dtap), Inactivated Polio vaccine (IPV), Haemophilus influenzae type b (Hib), Meningococcal B (Men B), Rotavirus, Meningococcal C (Men C), Pneumococcal conjugate vaccine (PCV) and Measles, mumps and rubella (MMR).

Vaccines given after two years old tend to have lower coverage:

- 53 out of 100 children aged 2-3 years have had their flu vaccine
- 87 out of 100 children aged 5 years have had their preschool vaccines (dTaP/IPV and MMR)
- 58 out of 100 primary school age children have had their flu vaccine (17 children in an average class of thirty)
- 66 out of 100 children aged 14-15 years have had their Meningococcal ACWY vaccine
- 38 out of 100 boys, and 45 out of 100 girls aged 12-13 years old, have had their Human papilloma virus (HPV) vaccine

Spine chart showing childhood vaccinations

Indicator	Period	Hartlepool		Region England			England		Best
		Recent Trend	Value	Value	Value	Worst	Range		
Children in care immunisations	2021	—	94.0%	89.0%	86.0%	22.0%		100%	
Population vaccination coverage - Dtap / IPV / Hib (1 year old)	2020/21	↑	95.7%	95.5%	92.0%	67.8%		98.5%	
Population vaccination coverage - PCV	2019/20	→	96.4%	96.4%	93.2%	74.8%		98.7%	
Population vaccination coverage - Hib / MenC booster (2 years old)	2020/21	↑	94.6%	95.3%	89.8%	68.0%		98.1%	
Population vaccination coverage - PCV booster	2020/21	↑	94.7%	95.3%	90.1%	70.5%		98.4%	
Population vaccination coverage - MMR for one dose (2 years old)	2020/21	↑	95.0%	95.3%	90.3%	70.7%		97.9%	
Population vaccination coverage - MMR for one dose (5 years old)	2020/21	→	95.9%	97.0%	94.3%	82.7%		98.4%	
Population vaccination coverage - MMR for two doses (5 years old)	2020/21	→	87.8%	92.5%	86.6%	59.8%		96.4%	
Population vaccination coverage - Hib / Men C booster (5 years old)	2017/18	→	94.5%	95.1%	92.4%	79.5%		100%	
Population vaccination coverage - Flu (2-3 years old)	2020/21	↑	52.8%	60.1%*	56.7%*	32.9%		73.7%	
Population vaccination coverage - MenB booster (2 years)	2020/21	—	93.7%	94.5%	89.0%	66.0%		98.1%	
Population vaccination coverage - MenB (1 year)	2020/21	—	95.8%	95.7%	92.1%	68.5%		98.5%	
Population vaccination coverage - DTaP/IPV booster (5 years)	2020/21	↓	87.0%	91.6%	85.3%	55.8%		96.0%	
Population vaccination coverage - Rotavirus (Rota) (1 year)	2020/21	→	94.0%	94.2%	90.2%	63.9%		96.5%	
Population vaccination coverage - Flu (primary school aged children)	2020	—	57.8%	66.1%*	62.5%*	36.1%		81.5%	

Source: COVER 2022

Spine chart showing teenage vaccination

Indicator	Period	Hartlepool		Region England			England		Best
		Recent Trend	Value	Value	Value	Worst	Range		
Population vaccination coverage - HPV vaccination coverage for one dose (12-13 year old) (Male) <div><div><80%</div><div>80% to 90%</div><div>≥90%</div></div>	2020/21	—	37.7%	62.9%	71.0%	28.6%	<div><div></div><div></div><div></div></div>	96.3%	
Population vaccination coverage - HPV vaccination coverage for one dose (12-13 year old) (Female) <div><div><80%</div><div>80% to 90%</div><div>≥90%</div></div>	2020/21	↓	44.6%	69.1%	76.7%	25.0%	<div><div></div><div></div><div></div></div>	98.3%	
Population vaccination coverage - HPV vaccination coverage for two doses (13-14 years old) (Female) <div><div><80%</div><div>80% to 90%</div><div>≥90%</div></div>	2020/21	→	60.6%	72.9%	60.6%	0.0%	<div><div></div><div></div><div></div></div>	95.8%	
Population vaccination coverage - Meningococcal ACWY conjugate vaccine (MenACWY) (14-15 years) <div><div><80%</div><div>80% to 90%</div><div>≥90%</div></div>	2020/21	→	65.6%	83.2%	80.9%	44.6%	<div><div></div><div></div><div></div></div>	98.7%	

Source: COVER 2022

Childhood accidents

For the majority of hospital admissions for childhood accidents, Hartlepool's rate is statistically similar to England average, however rates for emergency admission for exposure to animate mechanical forces for children aged 0-4 in Hartlepool is the highest in England. Injuries from animate mechanical forces includes accidental injuries caused by another person, as well as contact (bites, stings and impacts) from animals and plants.

Indicator	Period	Hartlepool		Region England			England		
		Recent Trend	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest	
Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4 years)	2020/21	➡	106.9	143.8	108.7	284.2		35.9	
Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 years)	2020/21	➡	76.9	100.4	75.7	144.0		26.5	
Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years)	2020/21	⬇	87.5	151.7	112.4	264.7		45.8	
Emergency admissions for falls in children aged 0-4	2018/19 - 20/21	—	510.4	561.7	428.6	1,093.7		184.5	
Emergency admissions for exposure to animate mechanical forces in children aged 0-4	2018/19 - 20/21	—	95.7	71.8	39.3	95.7		12.7	
Emergency admissions for exposure to inanimate mechanical forces in children aged 0-4	2018/19 - 20/21	—	191.4	352.1	208.6	487.6		90.3	
Emergency admissions for exposure to heat and hot substances in children aged 0-4	2018/19 - 20/21	—	63.8	91.9	76.1	341.3		19.3	
Emergency admissions for accidental poisoning in children aged 0-4	2018/19 - 20/21	—	159.5	204.9	114.1	344.8		31.0	
Emergency hospital admissions due to falls from furniture (aged 0-4 years)	2016/17 - 20/21	—	113.0	142.5	123.1	449.8		48.1	
Emergency hospital admissions due to burns from food and hot fluids (aged 0-4 years)	2016/17 - 20/21	—	37.7	50.8	44.4	196.0		12.7	
Emergency hospital admissions due to poisoning from medicines (aged 0-4 years)	2016/17 - 20/21	—	75.3	114.0	78.7	184.1		18.4	
Children killed and seriously injured (KSI) on England's roads	2018 - 20	—	13.0	20.9	15.9	55.0		2.6	
Children aged 5 and under killed or seriously injured in road traffic accidents	2018 - 20	—	5.3	9.9	7.0	28.9		0.0	
Children aged 6-10 killed or seriously injured in road traffic accidents	2018 - 20	—	16.7	15.1	12.2	55.9		0.0	
Children aged 11-15 killed or seriously injured in road traffic accidents	2018 - 20	—	17.7	39.9	30.8	91.7		0.0	

Source: NHS Digital/HES/OHID, 2022

Children who are overweight or obese

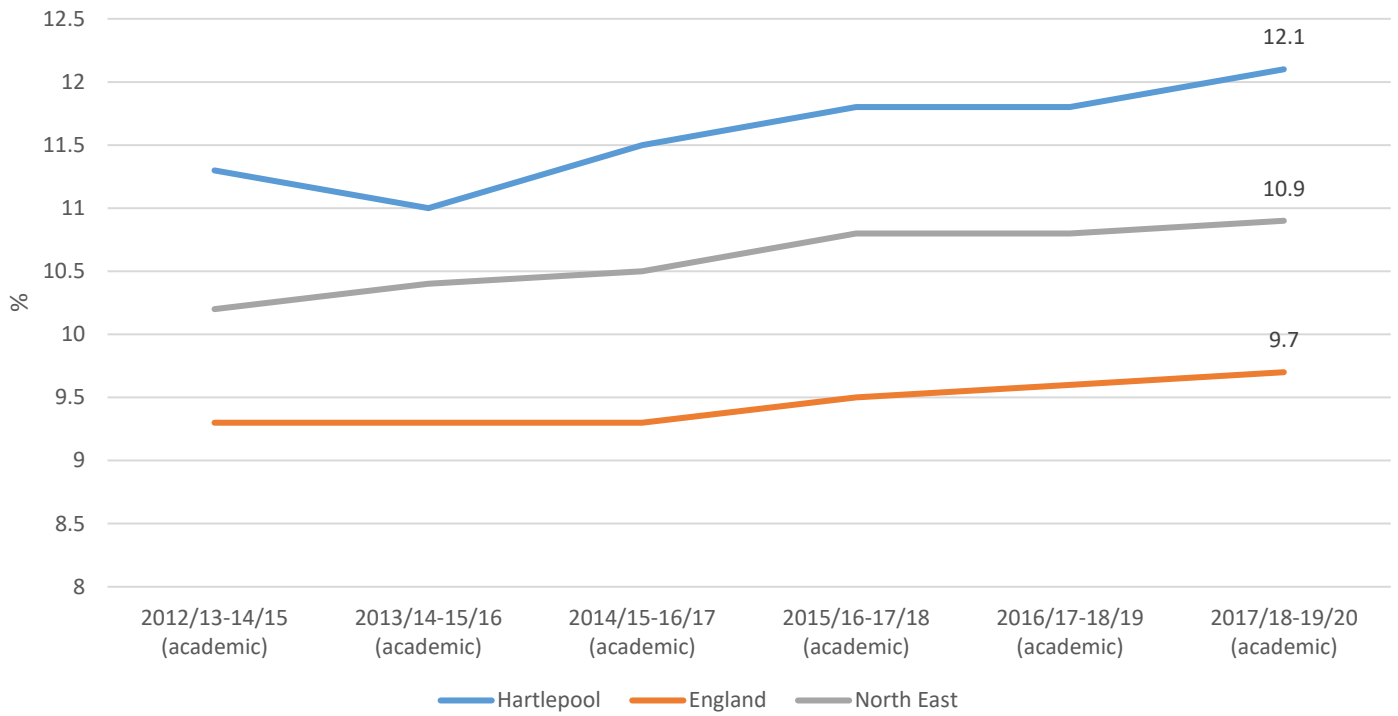
In an average class of thirty children starting school in Hartlepool, 9 are already overweight or obese (30 in 100). This is higher than an average class in the North East and England (7 in a class of thirty)

By year six of school, 12 children out of an average class of thirty are overweight or obese in Hartlepool (40 in 100).

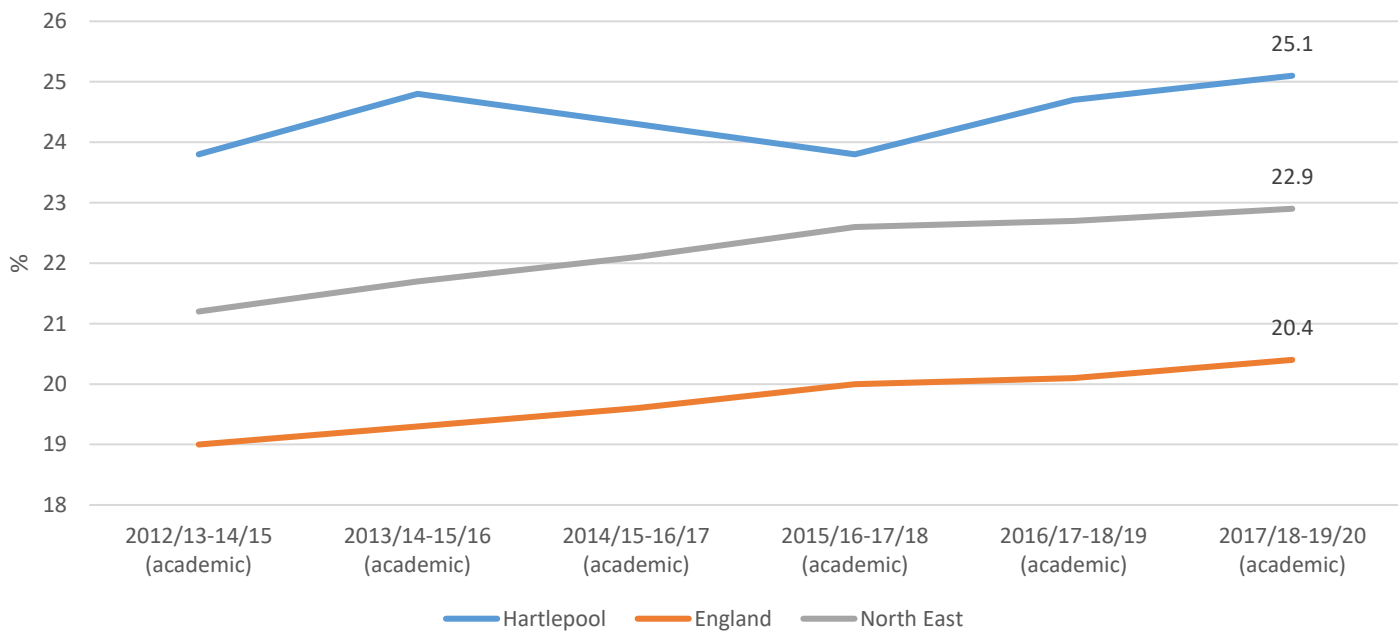
The number of children who are obese has been increasing over the last six years in Hartlepool, the North East and England. In a class of 30 children starting school, around 4 are already obese (12 in 100)

By year 6, more than 7 children in a class of thirty in Hartlepool are obese. Another way to visualise this is that a quarter (1 in 4) year 6 children are obese in Hartlepool.

% of Obese Children in Reception Year



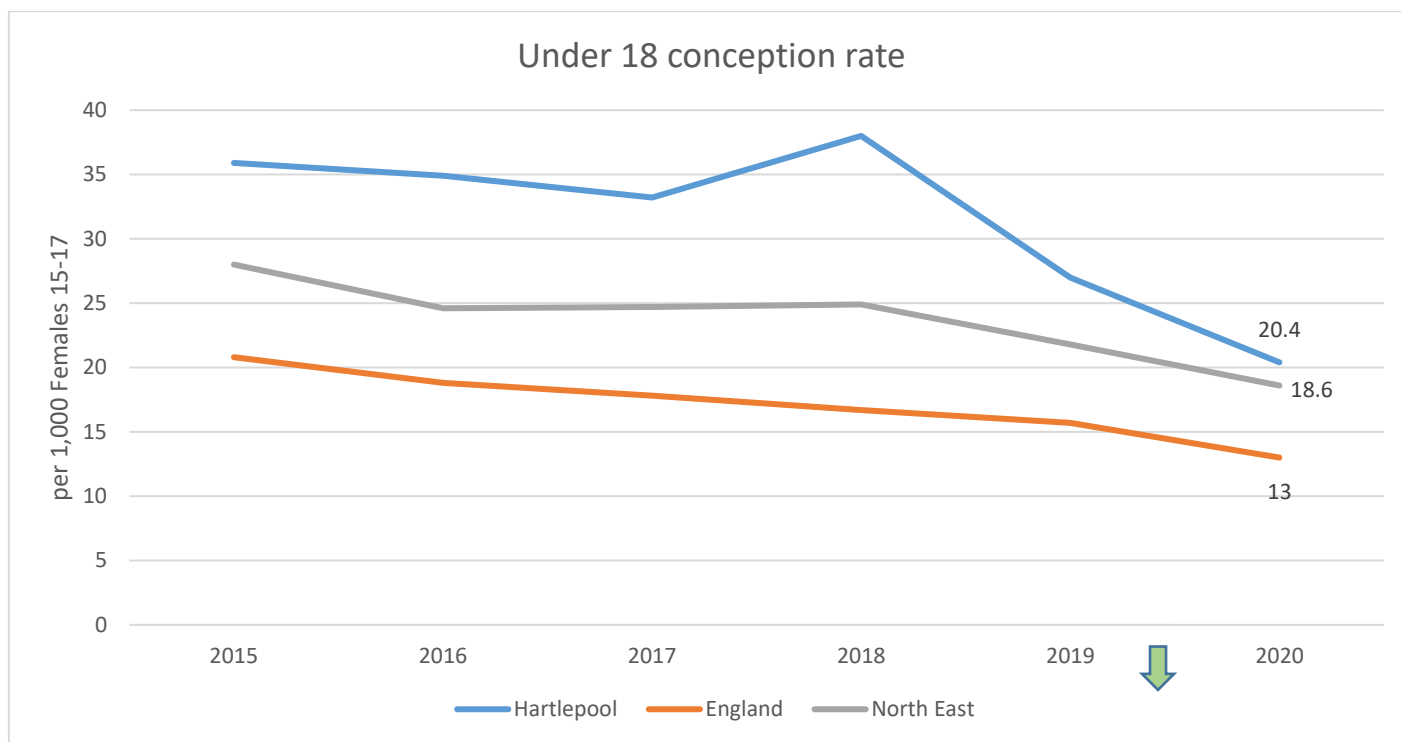
% of Obese Children in Year 6



Teenage pregnancy

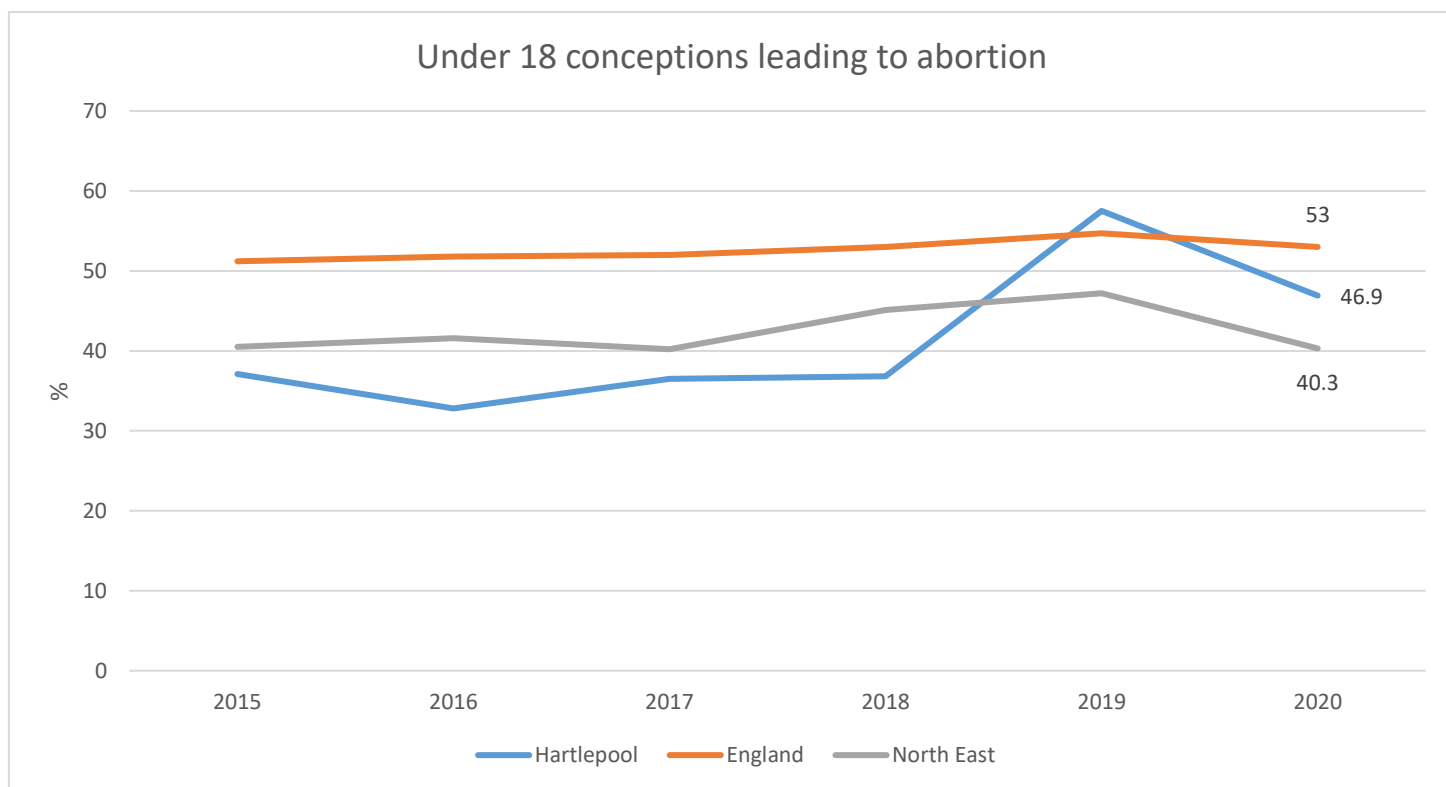
Fewer people aged under 18 are becoming pregnant (around 2 in 100 people aged 15-17 years became pregnant in 2020, compared to around 4 in 100 in 2018).

These figures are now similar to the north east regional average, though still higher than the England average.



Source: ONS 2022

Around half of teenage pregnancies end in abortion in England. In Hartlepool, between 2015 and 2020, the proportion of teenage pregnancies ending in abortions varied between 33 and 58 in a hundred teenage pregnancies.

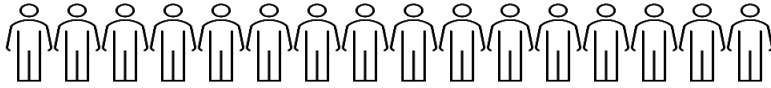


Living well (working age)

Smoking

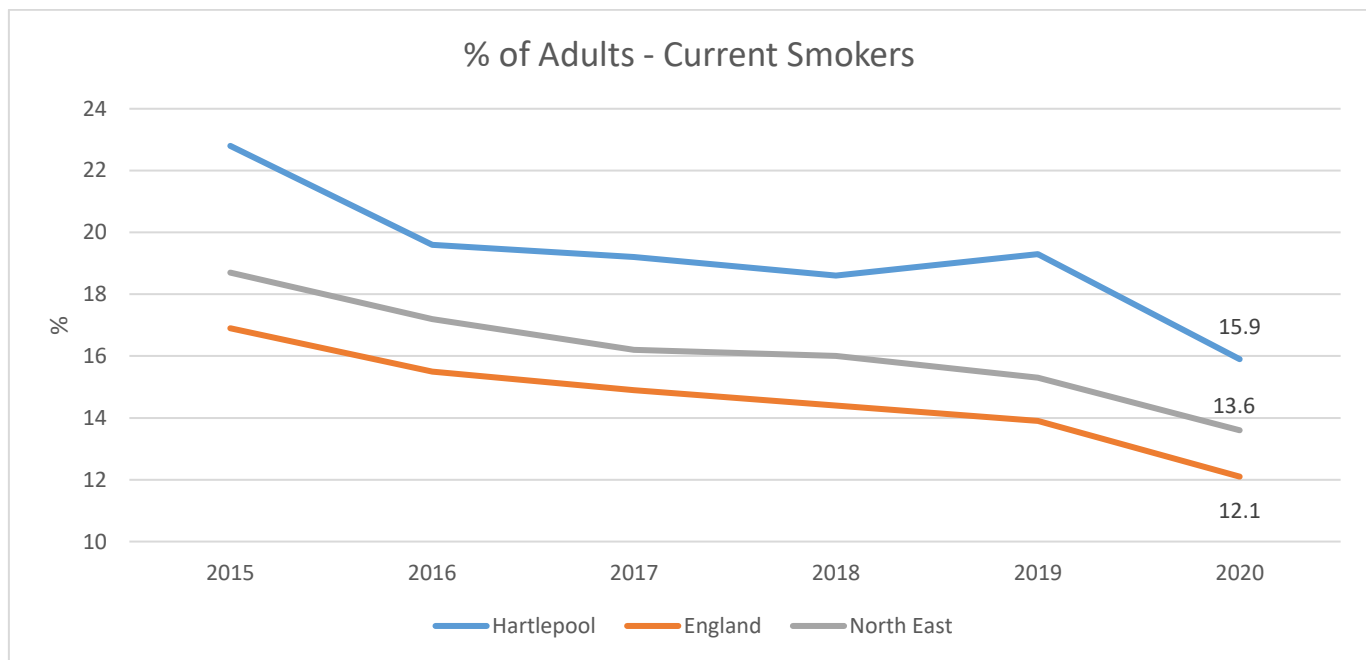
In an “average” Hartlepool street of one hundred adults, 16 people smoke.

Number of people smoking on an “average” Hartlepool street of one hundred adults

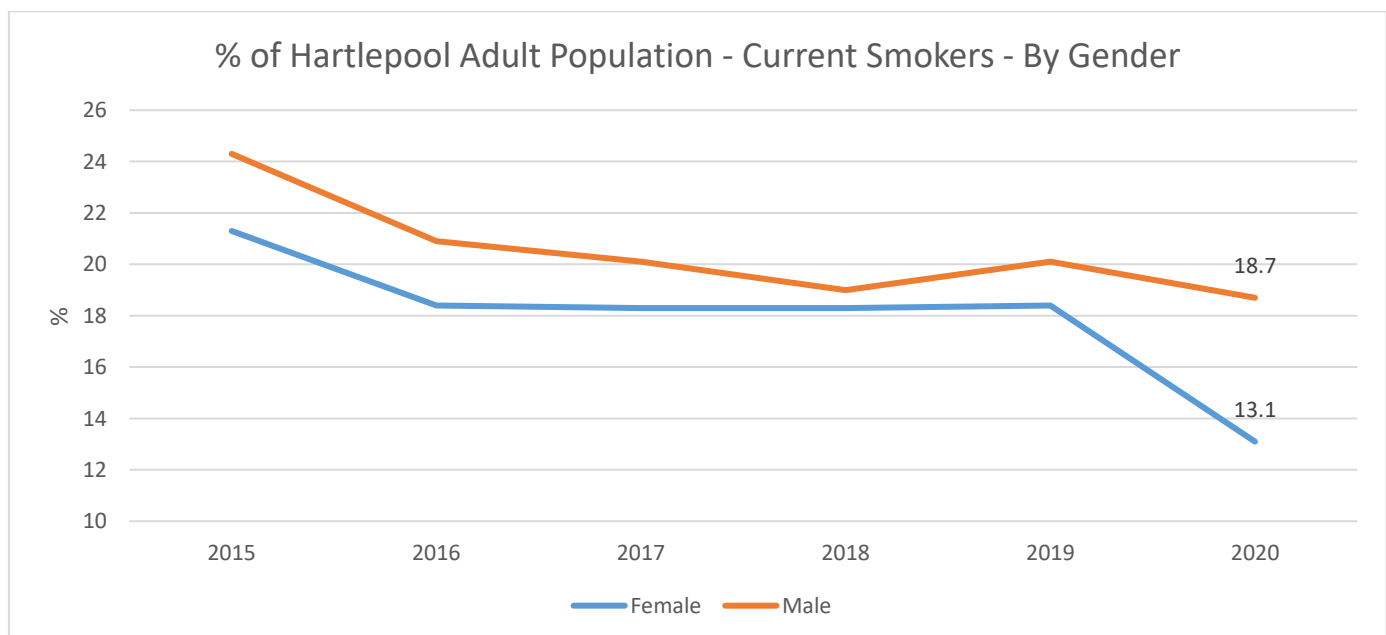


16 adults smoking on a street of 100

This is higher than an average street in the North East (14 in 100) and England (12 in 100) but is falling (from 20 in 100 in 2015).



There are fewer women smoking in Hartlepool than men.



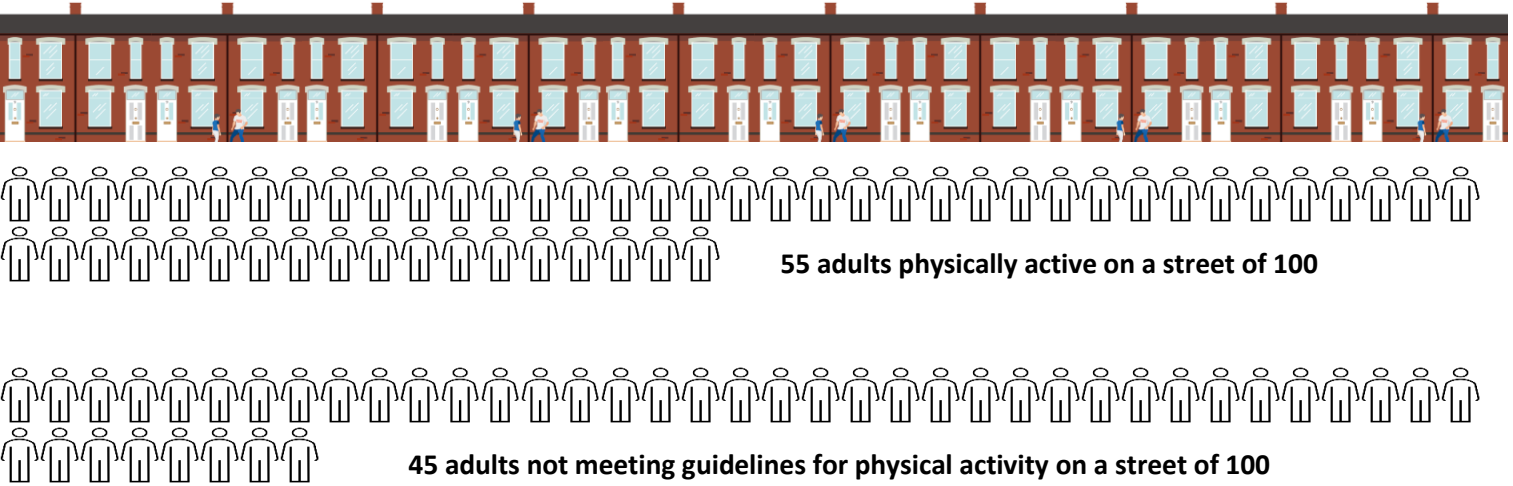
Illicit tobacco in Hartlepool continues to be an issue, with 6 premises reported for illegal tobacco sales in 20/21, with 2.45kg of rolling tobacco and 18,400 illicit cigarettes being seized by Hartlepool Trading Standards in 20/21.

Physical activity

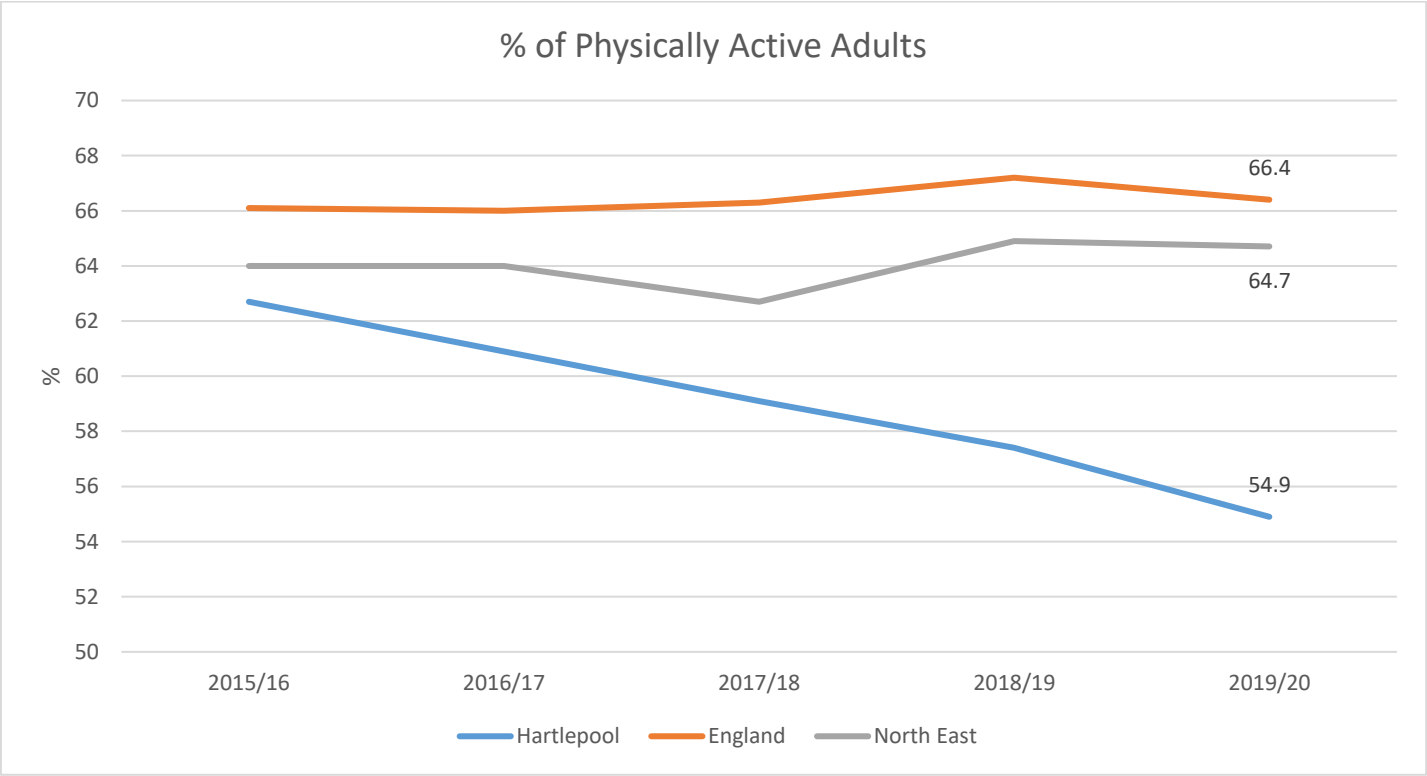
Physical activity reduces the risk of many diseases and helps maintain a healthy weight. Over time adults in Hartlepool have become less active. This is in contrast to the values for the England and north east averages which have remained stable.

In an “average” Hartlepool street of one hundred adults, 55 meet the guidance for being physically active (150 minutes of moderate activity, or 75 minutes vigorous activity per week).

Number of people physically active on an “average” Hartlepool street of one hundred adults



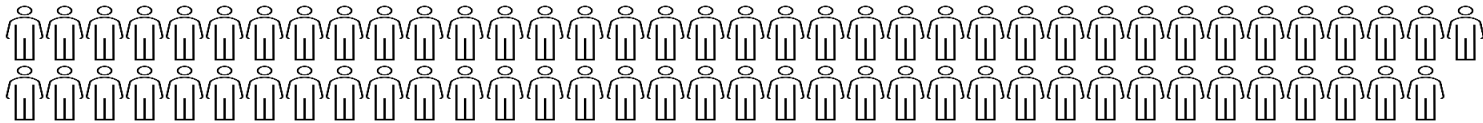
The graph below shows the steady decline in people meeting the guidelines for physical activity from 2015/16 to 2019/20.



Adults who are overweight or obese

Over time, more adults in Hartlepool have become overweight or obese.

In an “average” Hartlepool street of one hundred adults, 73 adults are overweight or obese. This means almost three quarters of adults in Hartlepool are overweight or obese.






This is higher than an average street in the North East or England (68 in 100 in North East 63 in 100 in England)

The line graph displays the percentage of adults classified as overweight or obese for three regions: Hartlepool (blue line), England (orange line), and the North East (grey line) across five financial years from 2015/16 to 2019/20. The y-axis represents the percentage, ranging from 60% to 78% in increments of 2%. Hartlepool shows a general upward trend, peaking at 75.7% in 2018/19 before a slight decline to 73% in 2019/20. The North East shows a more stable trend, fluctuating between 64.8% and 66.5%. England shows a steady, gradual increase from 61.3% to 62.8%.

Year	Hartlepool (%)	England (%)	North East (%)
2015/16	67.5	61.3	66.3
2016/17	71.0	61.3	66.0
2017/18	70.4	62.0	66.5
2018/19	75.7	62.3	64.8
2019/20	73.0	62.8	67.6

Sexual health

Spine chart showing STI indicators

Indicator	Period	Hartlepool		Region		England		
		Recent Trend	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
New STI diagnoses (exc chlamydia aged <25) / 100,000	2020	↓	430	449	619	3,547		247
STI testing rate (exc chlamydia aged <25) / 100,000	2020	↓	1,608.6	2707.1	4549.3	940.6		19,881.8
STI testing positivity (exc chlamydia aged <25) %	2020	↑	12.3%	7.3%	7.3%	0.0%		19.0%

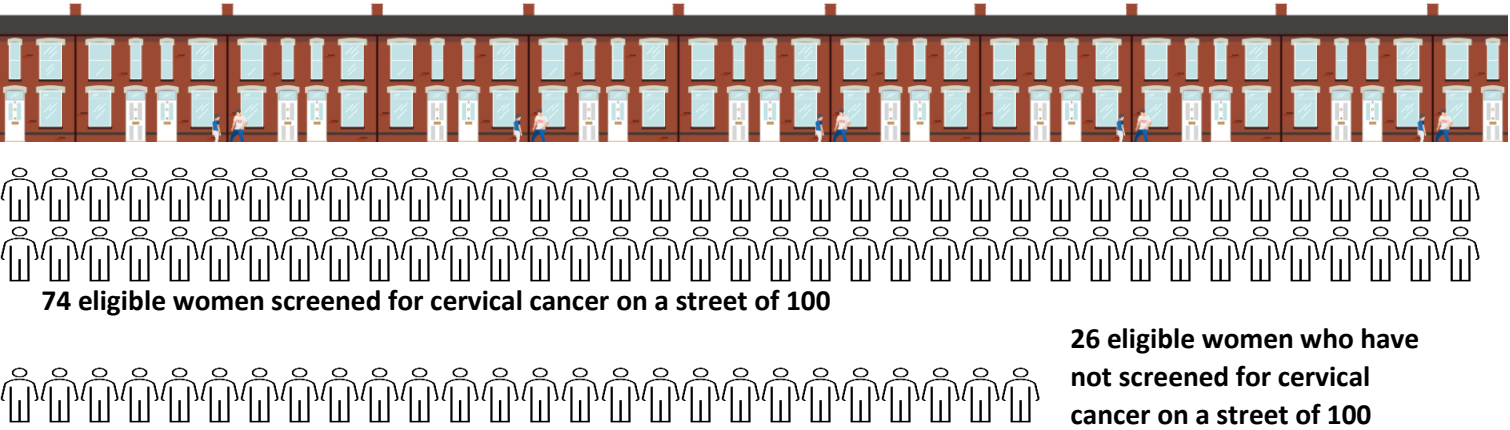
Source: OHID 2022

Cervical screening

Cervical screening is offered to all women and people with a cervix aged 25 to 64 to check the health of cells in the cervix. It is offered every three years for those aged 25 to 49, and every five years from the ages of 50 to 64.

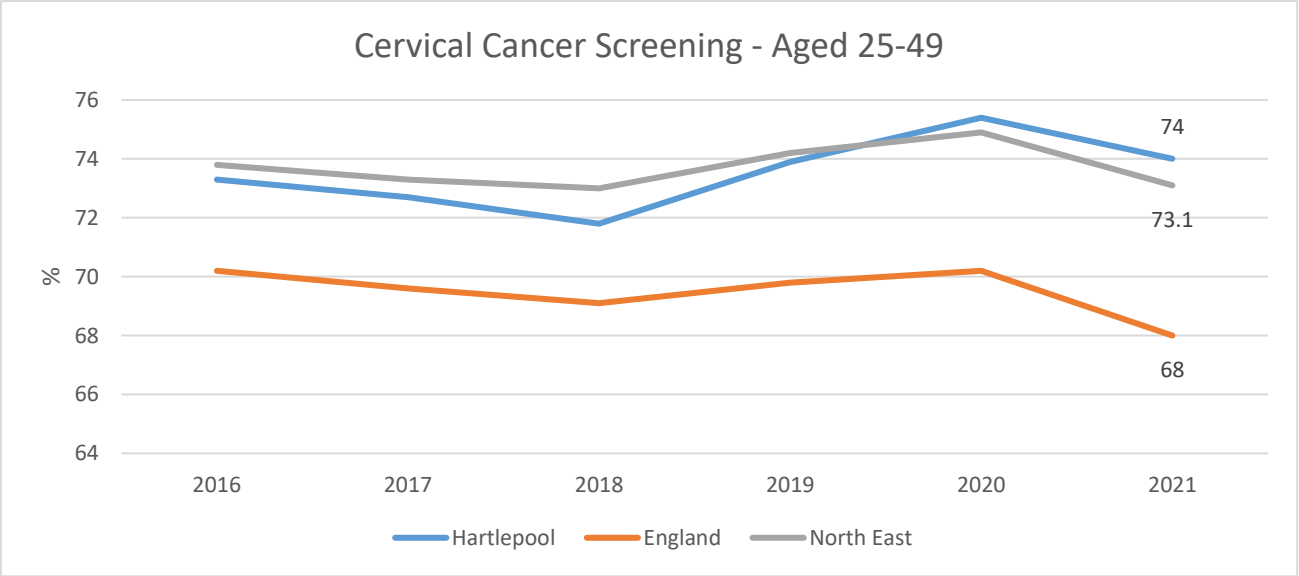
In an “average” Hartlepool street of one hundred women aged 25-49, 74 have been screened.

Number of women screened for cervical cancer on an “average” Hartlepool street of one hundred eligible women

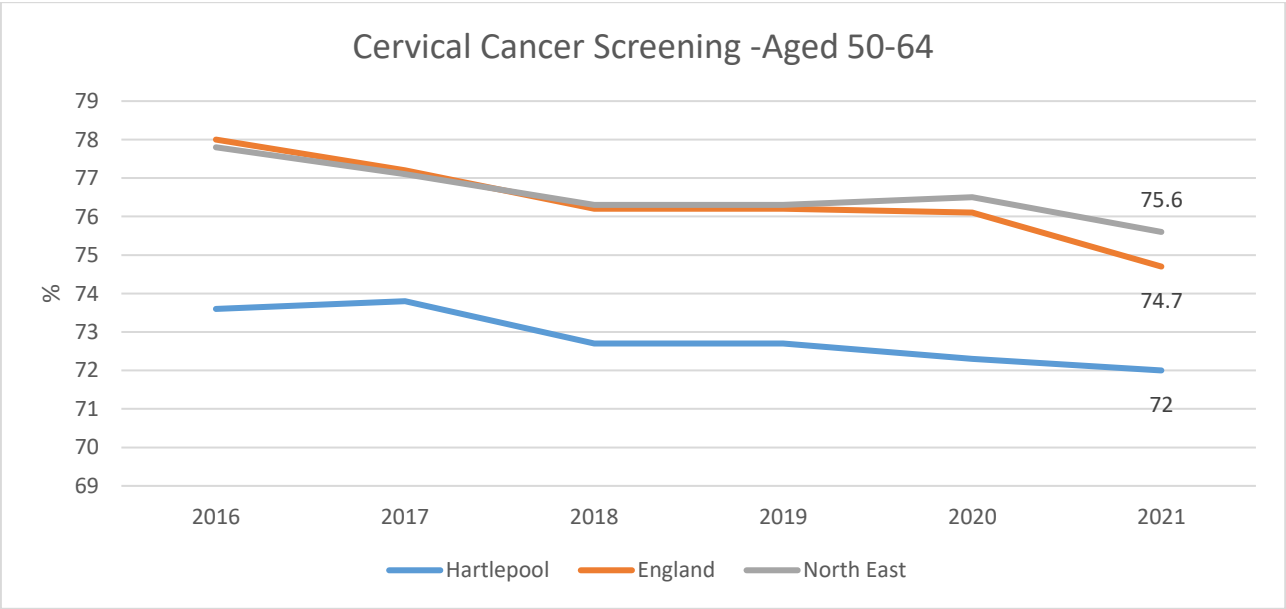


This is better than an average street in England where only 68 in 100 women have been screened.

In an “average” Hartlepool street of one hundred women aged 50-64, 72 have been screened.



Source: NHS Digital/OHID 2022



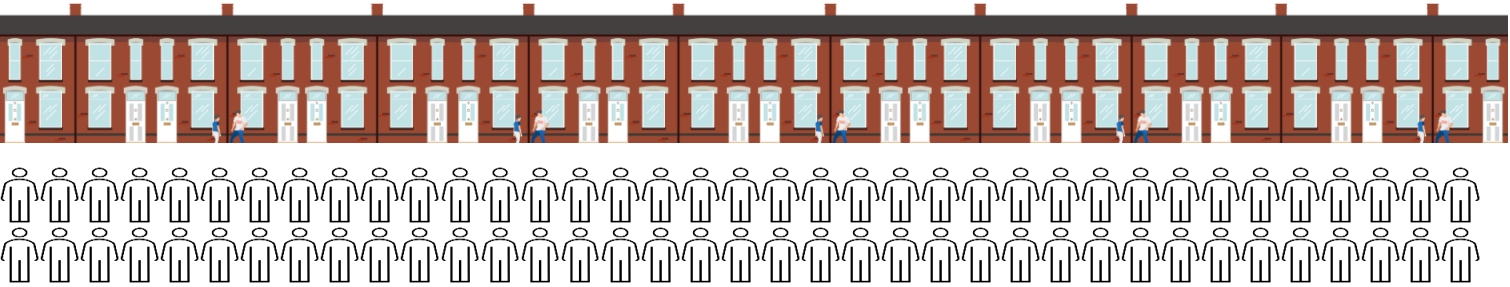
Breast screening

Breast screening is offered to women aged 50 to 70 to detect early signs of breast cancer.

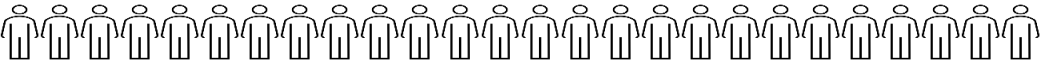
The proportion of people aged 53-70 who have been screened for breast cancer in the last 3 years fell sharply in 2021 in England, the North East and Hartlepool.

In an “average” Hartlepool street of one hundred women aged 53-70 years, 74 would normally be screened. In 2021 this dropped to 67 in 100. However, this figure is better than an average street in England (64 in 100).

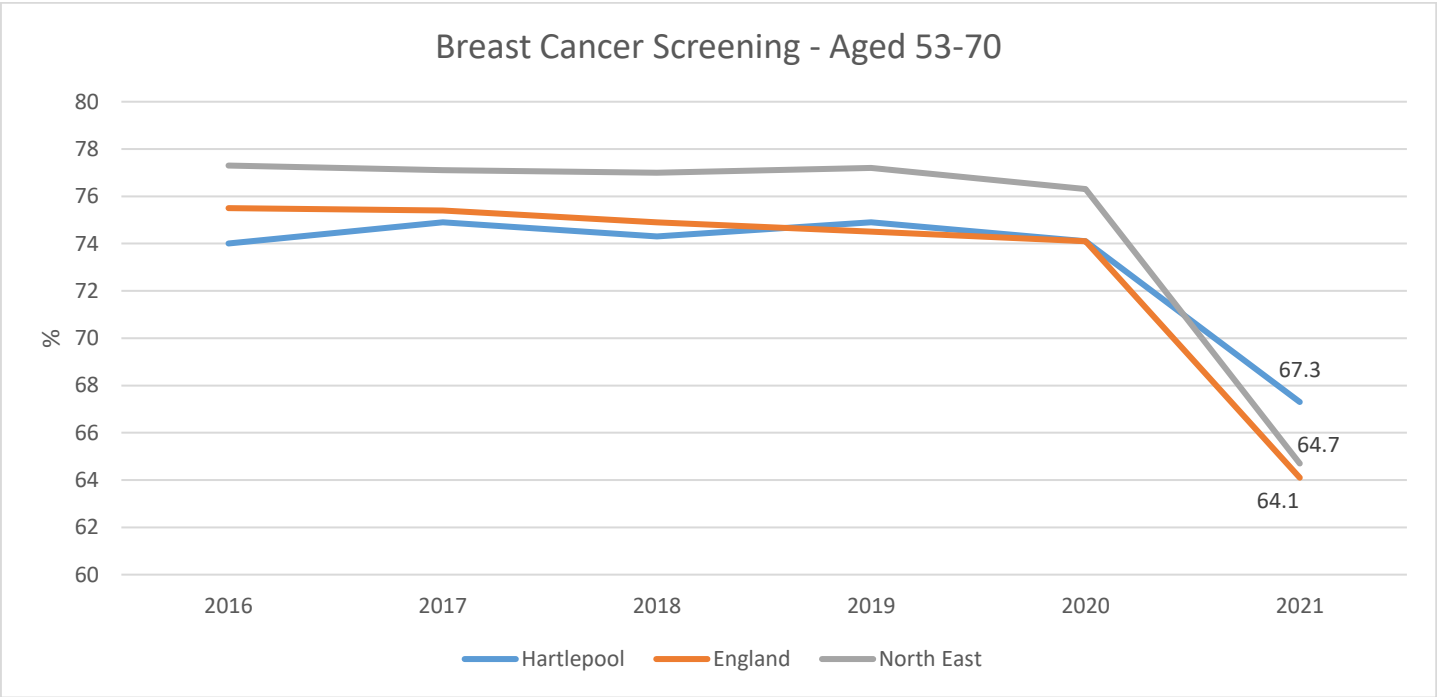
Number of women screened for breast cancer on an “average” Hartlepool street of one hundred eligible women



74 eligible women screened for breast cancer on a street of 100



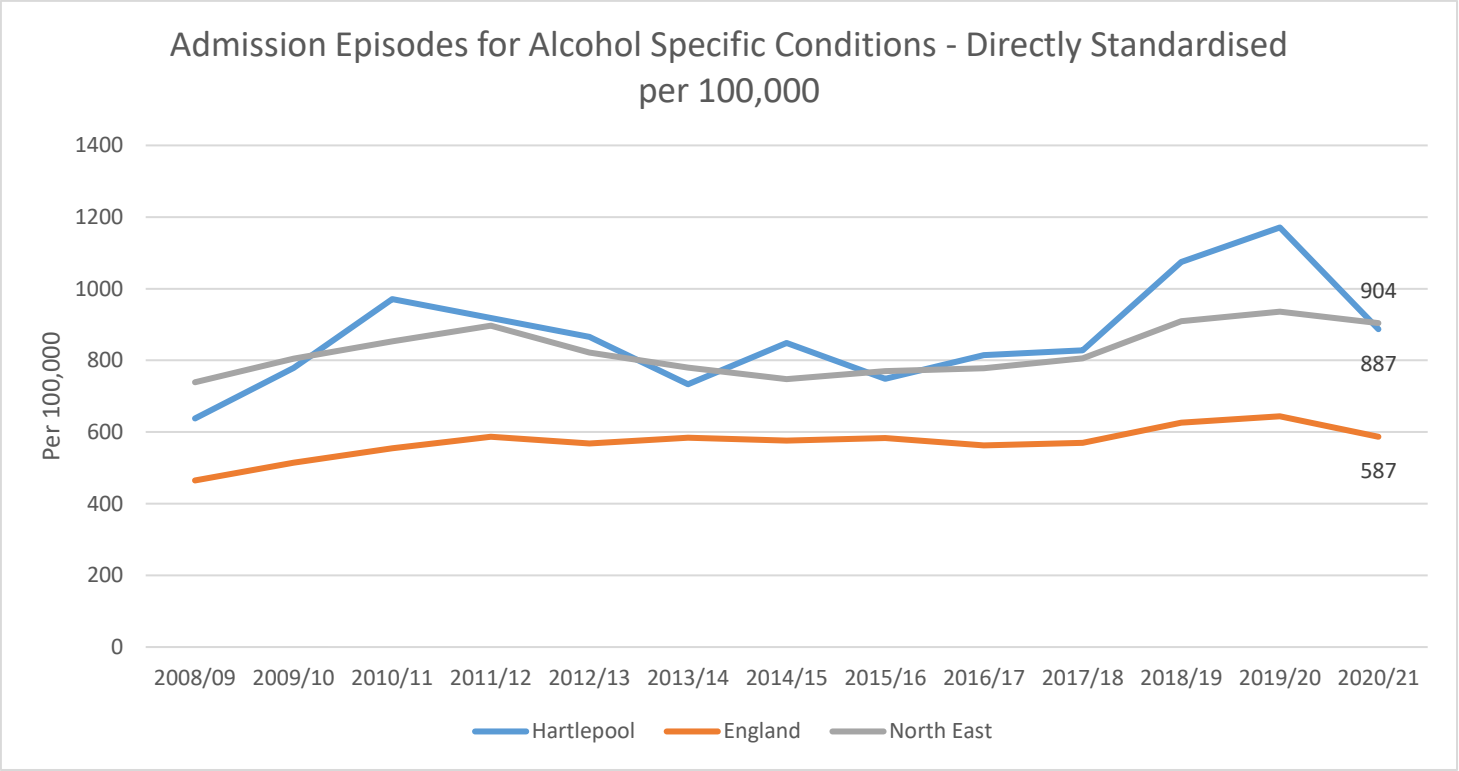
26 eligible women who have not screened for breast cancer on a street of 100



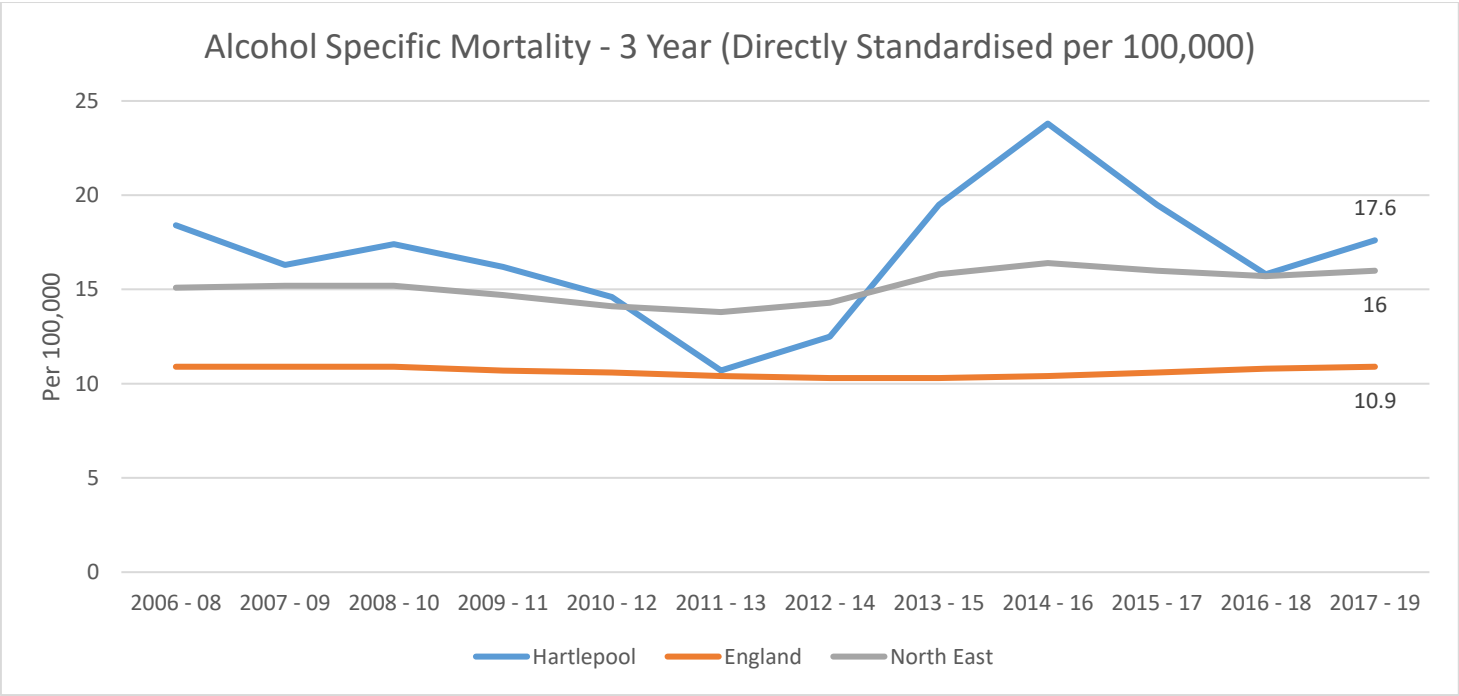
Hospital admissions and deaths due to alcohol

Hospital admissions and deaths due to alcohol are higher in Hartlepool than England, even when accounting for age of population through direct standardisation.

There were 904 admissions specifically due to alcohol for every 100,000 people in Hartlepool, compared with less than 600 admissions per 100,000 people in England.

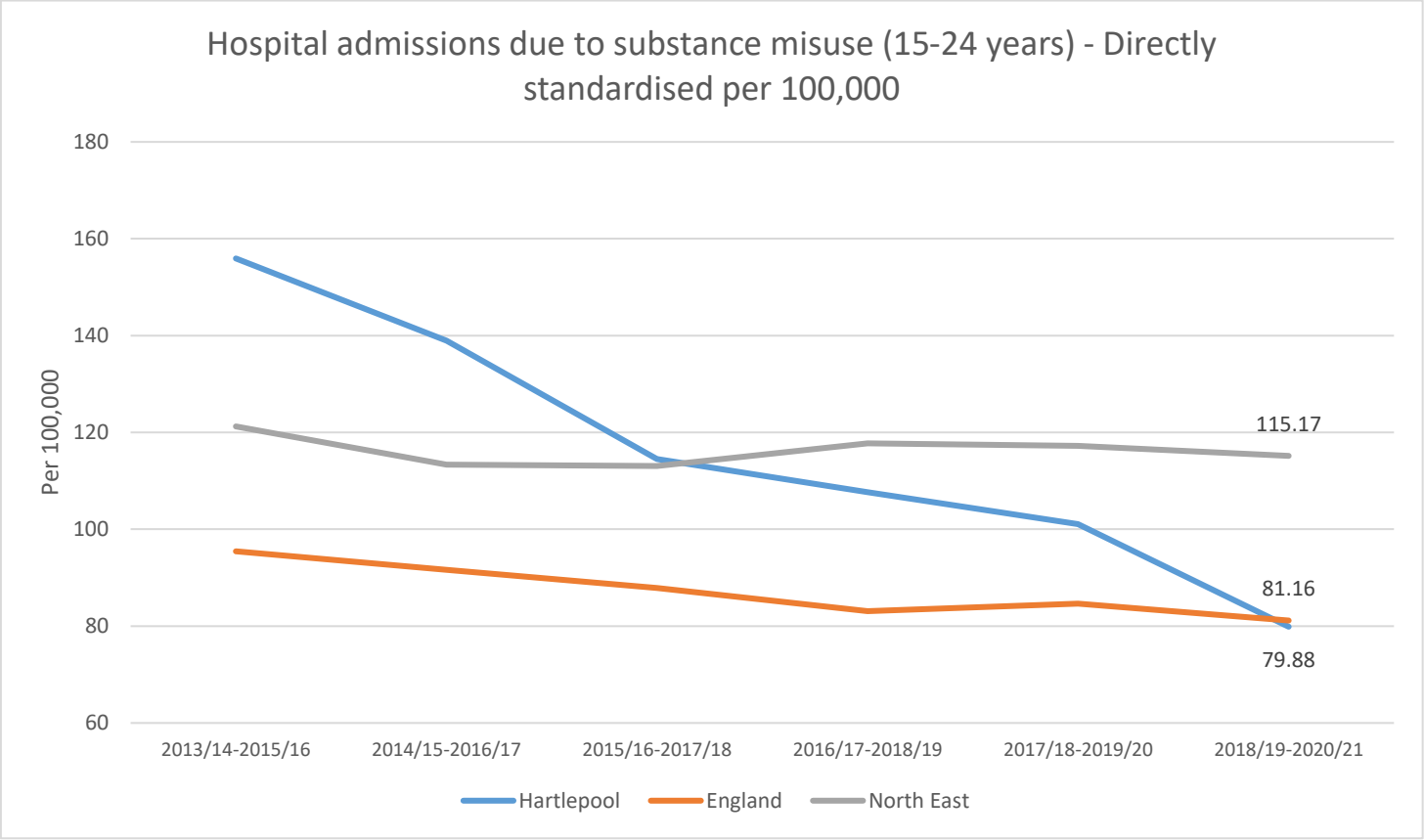


Between 2017 and 2019, there were more deaths specifically due to alcohol in Hartlepool compared with England (around 18 deaths specifically due to alcohol for every 100,000 in people Hartlepool compared with 11 deaths per 100,000 in England).

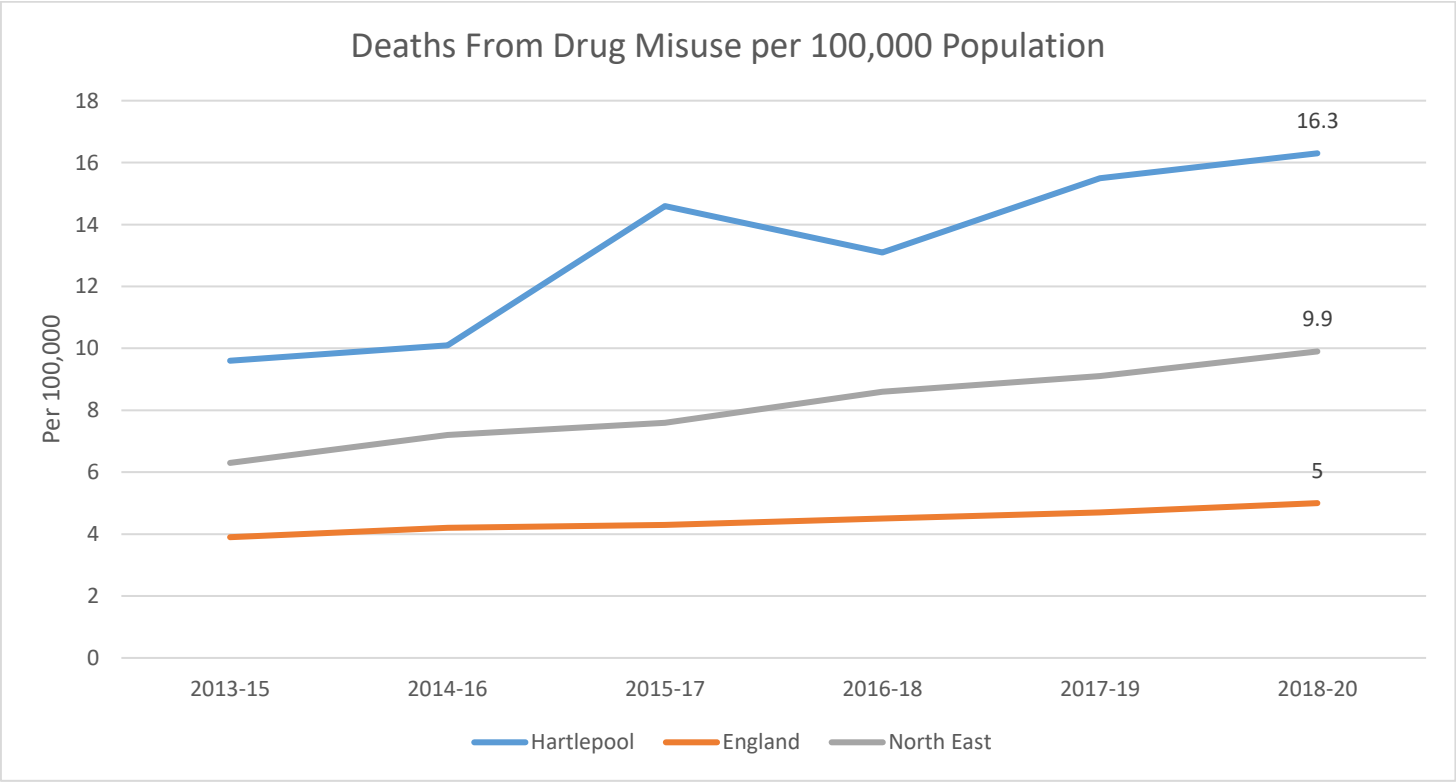


Hospital admissions and deaths due to illegal drugs (substance misuse)

In Hartlepool, drug-related hospital admissions have fallen over time but drug related deaths have increased.



There were 16 deaths specifically due to drugs for every 100,000 people in Hartlepool compared with 11 deaths per 100,000 in England and the gap in death rates has worsened over time.



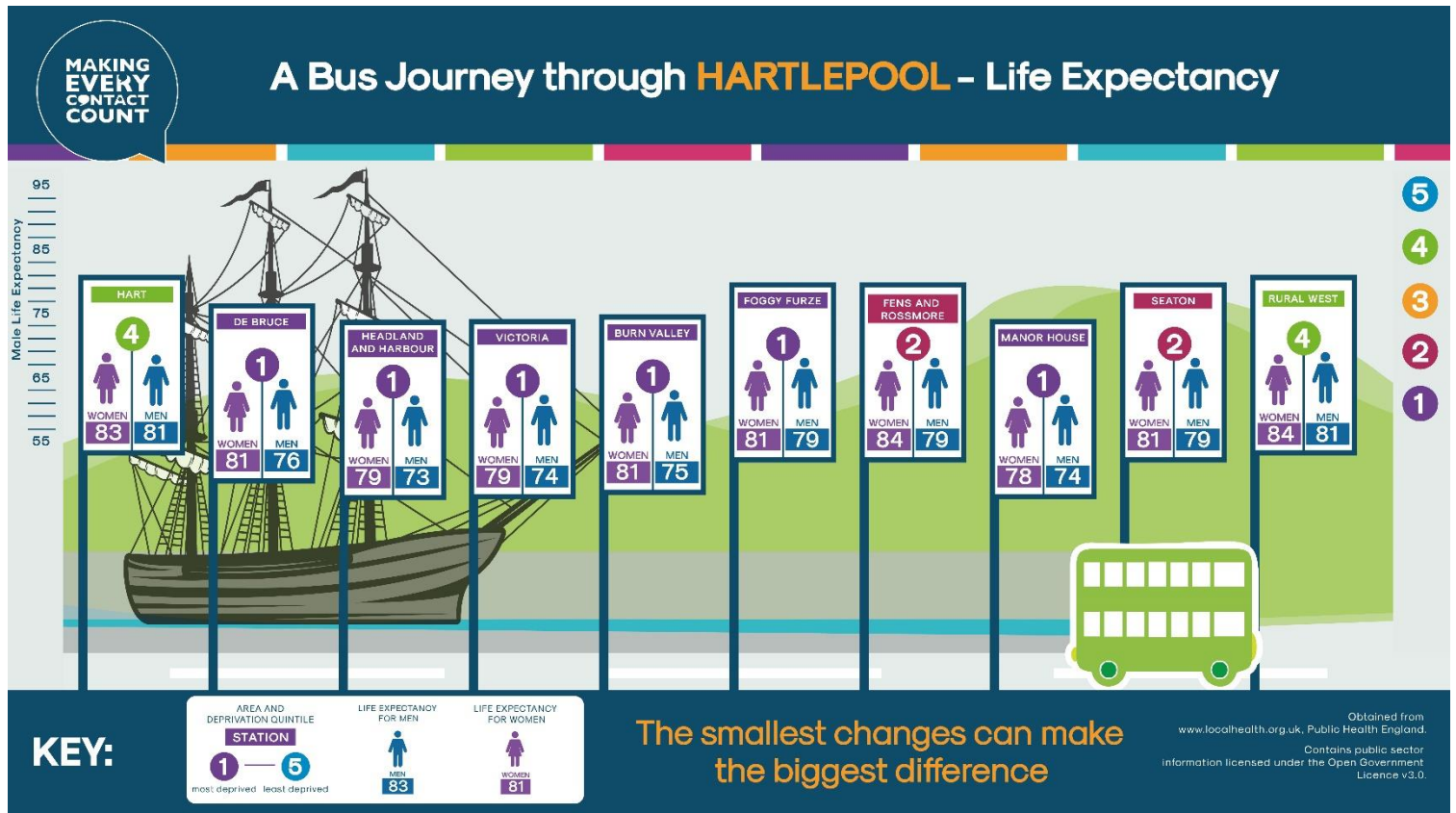
Source: ONS, 2022

Living well in later life

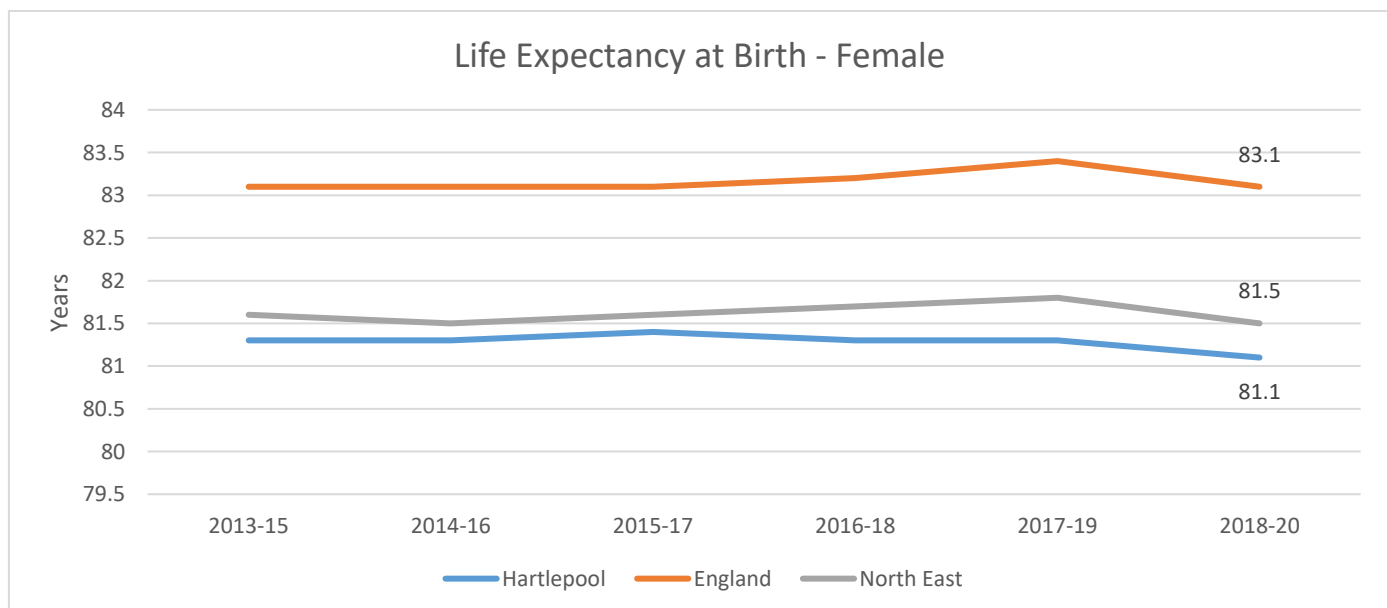
Length of life (Life Expectancy)

People in Hartlepool live shorter lives than people in the North East and England. In an average street in Hartlepool a women can expect to live to around 81 years old and a man can expect to live around 77 years old. In an average street in England, people can expect to live around 2 years longer (women can expect to live to around 83 and men can expect to live around 79 years old).

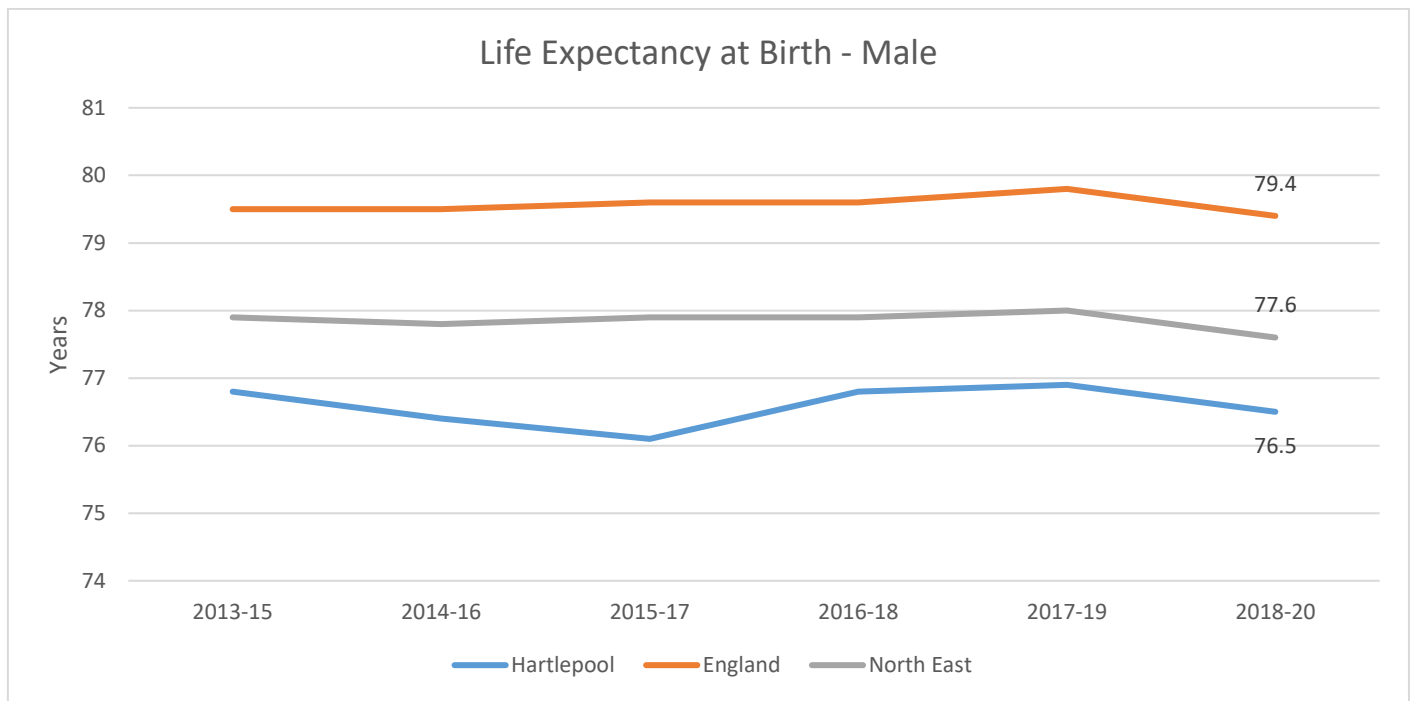
Life expectancy does vary across different areas of Hartlepool. For example in Manor House people can expect to live around 6 years less than people in Rural West. This is illustrated in the picture below showing life expectancy in different areas.



Hartlepool has experienced a downward trend in life expectancy in the latest figures for both males and females, however this is mirrored in the both the England and north east figures.



Source: ONS 2022

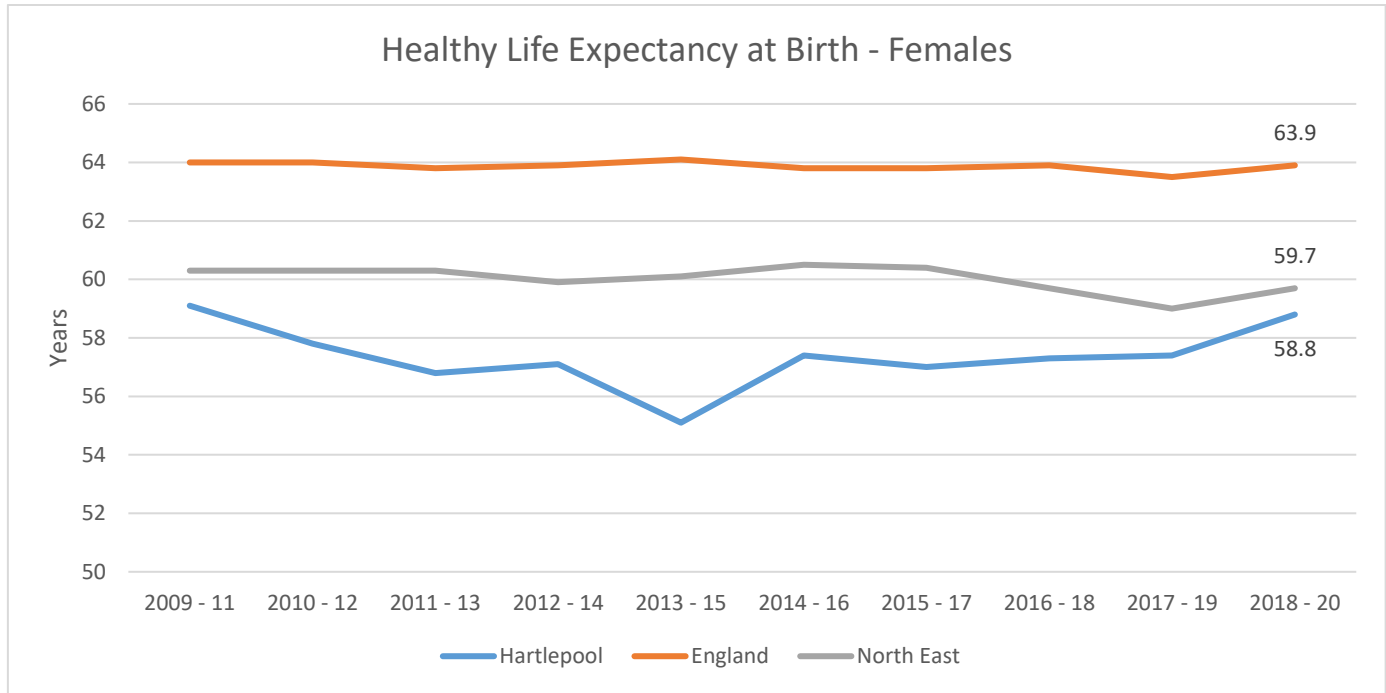


Source: ONS 2022

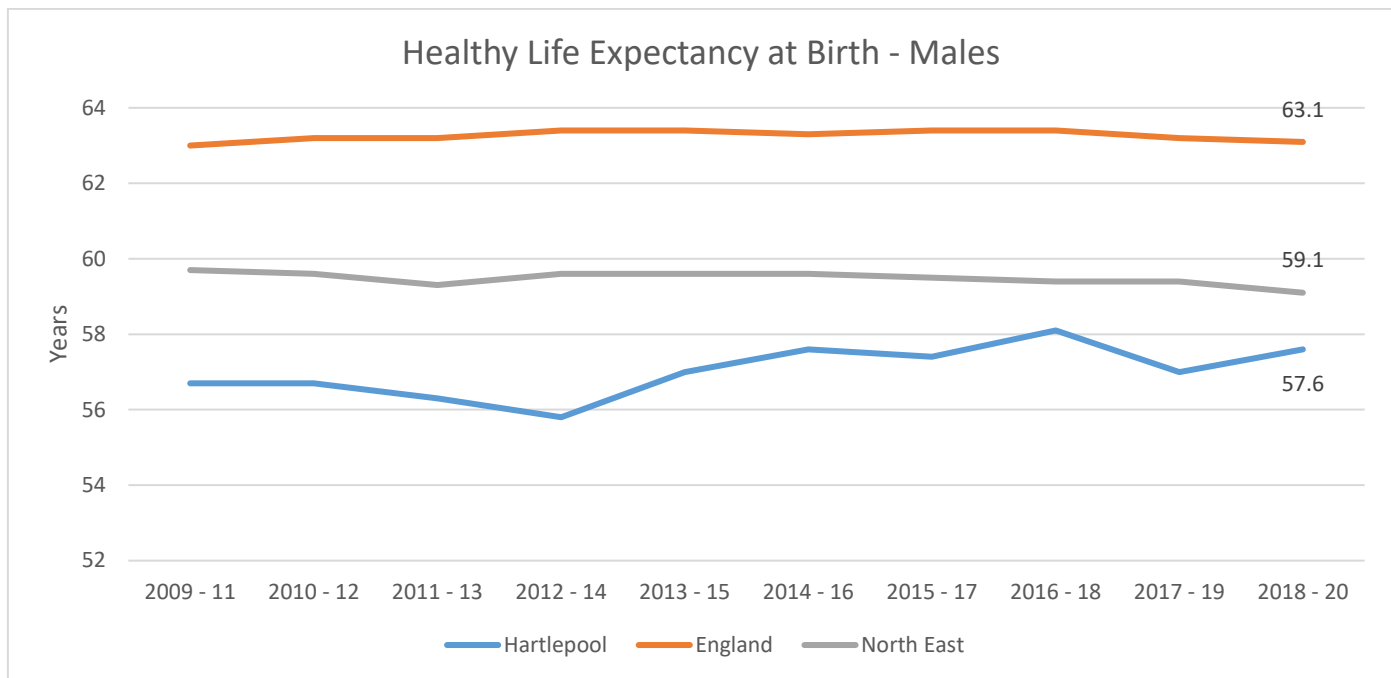
Healthy Life expectancy

Although length of life is important, quality of life of any extra years is arguably more essential. Healthy Life Expectancy (HLE) is number of years a person would expect to live in good health. It is based on death rates and the proportion of people reporting their health as “good” in surveys.

For healthy life expectancy, the Hartlepool figures are below both the national and regional averages.



Source: ONS 2022



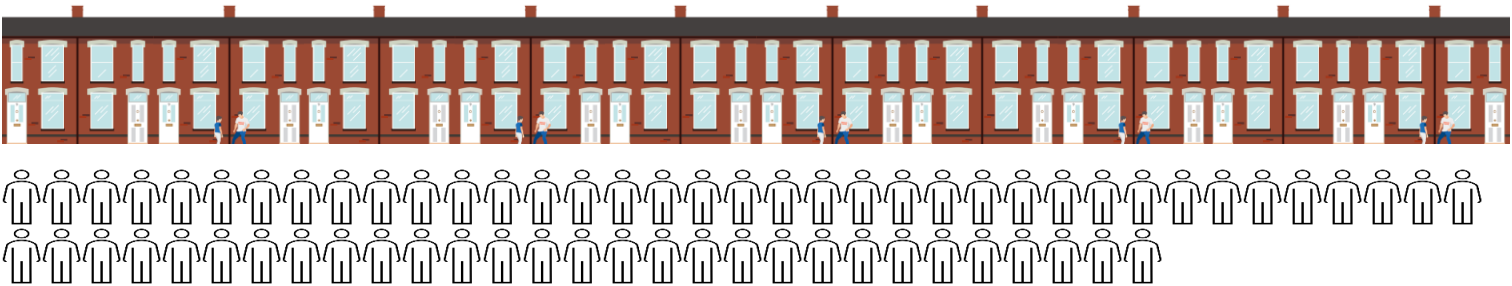
Source: ONS 2022

Both male and female healthy life expectancy at birth dipped in a way that was not mirrored by either the north east or England rates. For Hartlepool males the dip was in 2012-14 and for females in 2013-15. However both Hartlepool rates have increased since these points. Both male and female rates in Hartlepool have increased in the latest figures, with the female rate closer to the north east average than at any other point in the reporting period.

Bowel cancer screening

In an “average” Hartlepool street of one hundred people aged 60-74 years old, 65 have been screened for bowel cancer. This is similar to the number of people screened in an average street in England.

Number of people screened for bowel cancer on an “average” Hartlepool street of one hundred eligible people



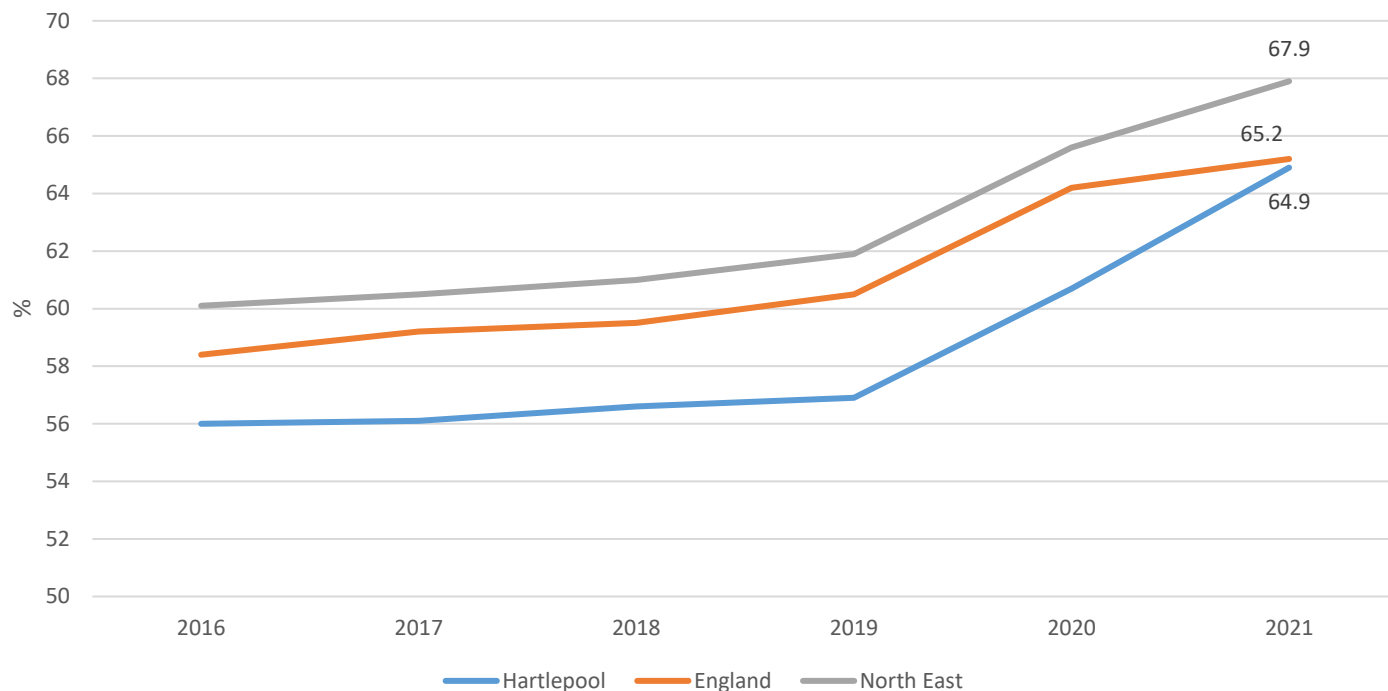
65 eligible people screened for bowel cancer on a street of 100



35 eligible people who have not screened for bowel cancer on a street of 100

The graph below shows more people in Hartlepool are getting screened for bowel cancer than previously (57% in 2019 to 65% in 2021).

Cancer Screening Coverage - Bowel Cancer (Aged 60-74)



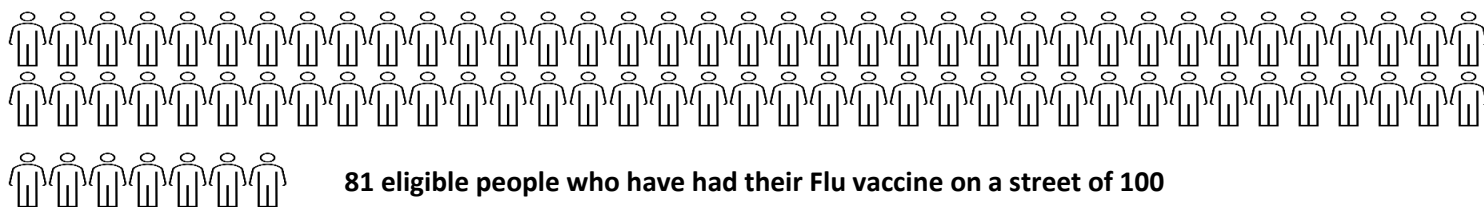
Immunisations

Adults are offered a single dose of Pneumococcal vaccine (PPV) at 65 years old and the Shingles vaccine between 70-79.

Adults 65 years and older (any younger people with particular health problems) are offered the Flu vaccine each year.

In an “average” Hartlepool street of one hundred eligible people, 81 have had their Flu vaccine, 62 have had their Pneumococcal vaccine, and 43 have had their shingles vaccine.

Number of women screened for breast cancer on an “average” Hartlepool street of one hundred eligible women



19 eligible people who have not had their Flu vaccine on a street of 100

Of the adult vaccinations in Hartlepool, only Flu for people aged 65 years and older has hit the required target threshold, in this case 75%. This vaccination is also the only one showing a positive upward trend.

Spine chart showing adult vaccinations

Indicator	Period	Hartlepool		Region England			England	
		Recent Trend	Value	Value	Value	Worst	Range	Best
Population vaccination coverage - PPV <65% 65% to 75% ≥75%	2020/21	➡	62.0%	73.7%	70.6%	49.9%		81.0%
Population vaccination coverage - Flu (aged 65+) <75% ≥75%	2020/21	⬆	80.9%	83.7%*	80.9%*	63.5%		85.8%
Population vaccination coverage - Flu (at risk individuals) <55% ≥55%	2020/21	➡	52.5%	56.6%*	53.0%*	33.8%		64.3%
Population vaccination coverage – Shingles vaccination coverage (71 years) <50% 50% to 60% ≥60%	2019/20	—	43.1%	50.8%	48.2%	25.8%		68.7%

Source: COVER 2022

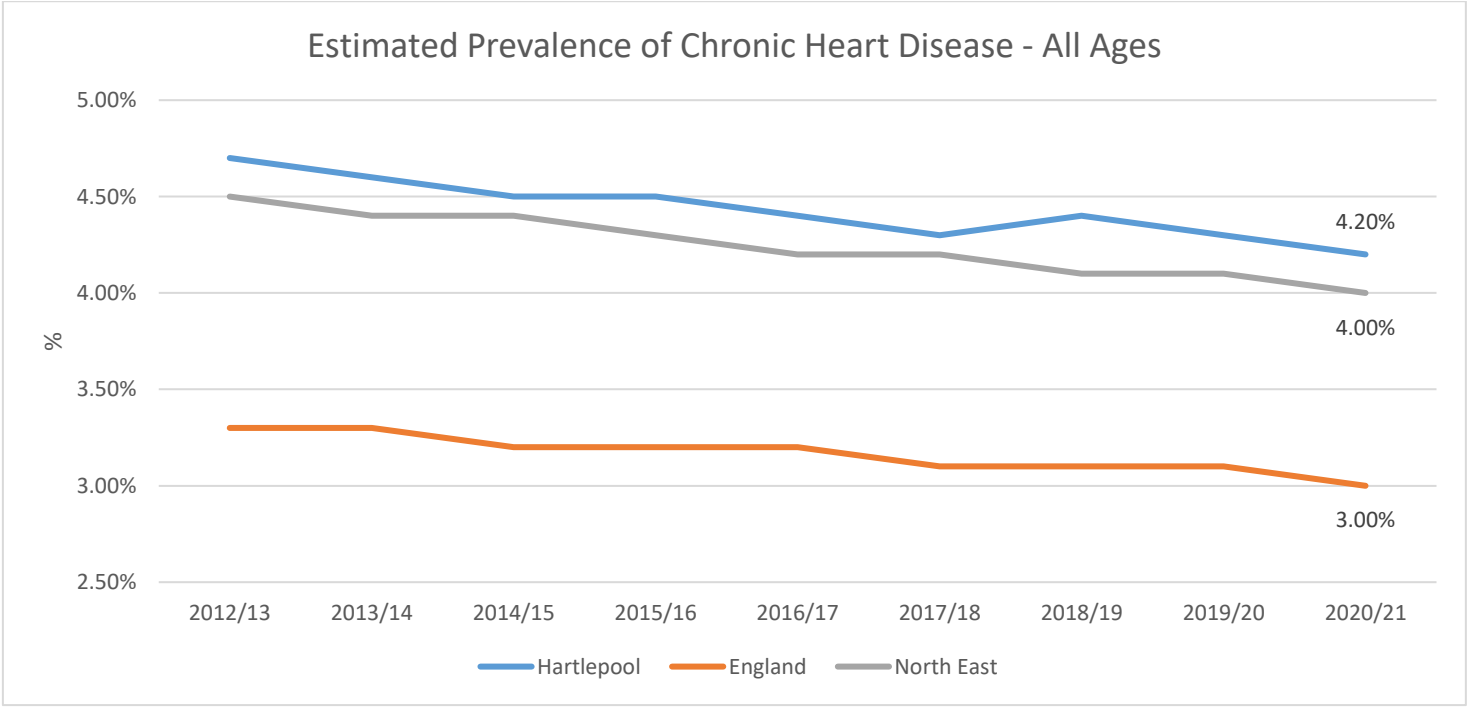
People living with chronic heart disease

In an “average” Hartlepool street of one hundred people, 4 are living with heart disease. In an average street in England 3 are living with heart disease.

Number of people living with heart disease on an “average” Hartlepool street of one hundred people



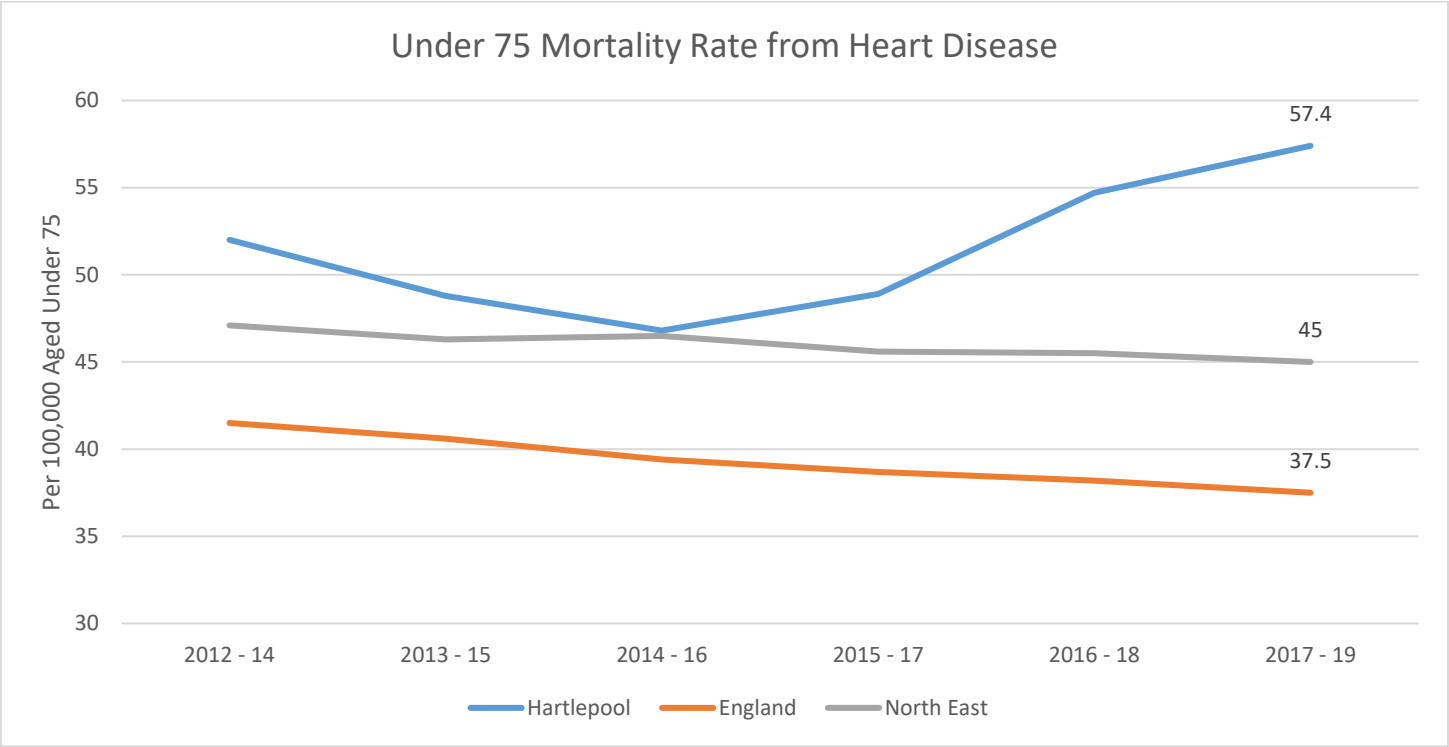
These figures are generally decreasing over time.



Early deaths from heart disease

Heart disease and stroke are common causes of death in old age. It is important to act on early deaths (deaths under 75 years) or preventable deaths due to heart disease or stroke. This can help people can live longer healthier lives.

The graph below shows early deaths due to heart disease in people in Hartlepool increased from 48.6 per 100,000 in 2014/16 to 57.4 per 100, 000 in 2017/19. During these years deaths due to heart disease have been falling in the North East and England so the gap between Hartlepool and the rest of the country is worsening.



Source: ONS/OHID 2022

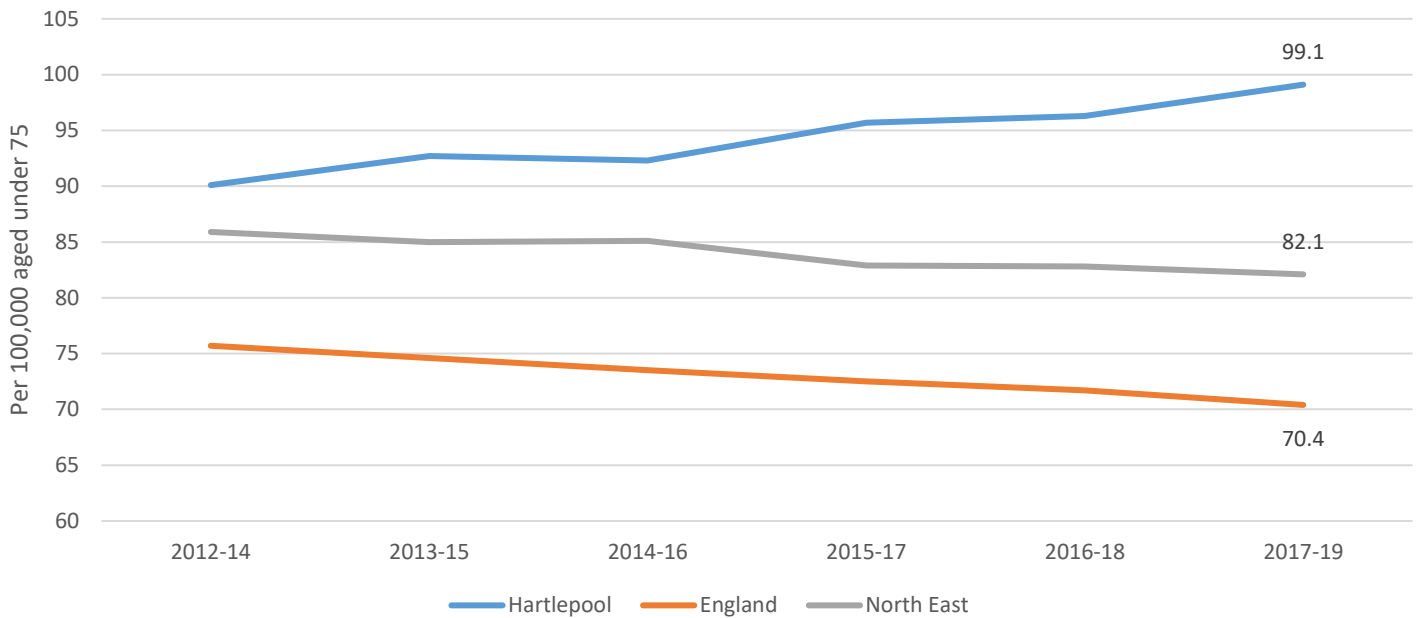
Early deaths from either heart disease or stroke

Deaths due to heart disease or stroke are often examined together (under cardiovascular disease) since they share many of the same risk factors.

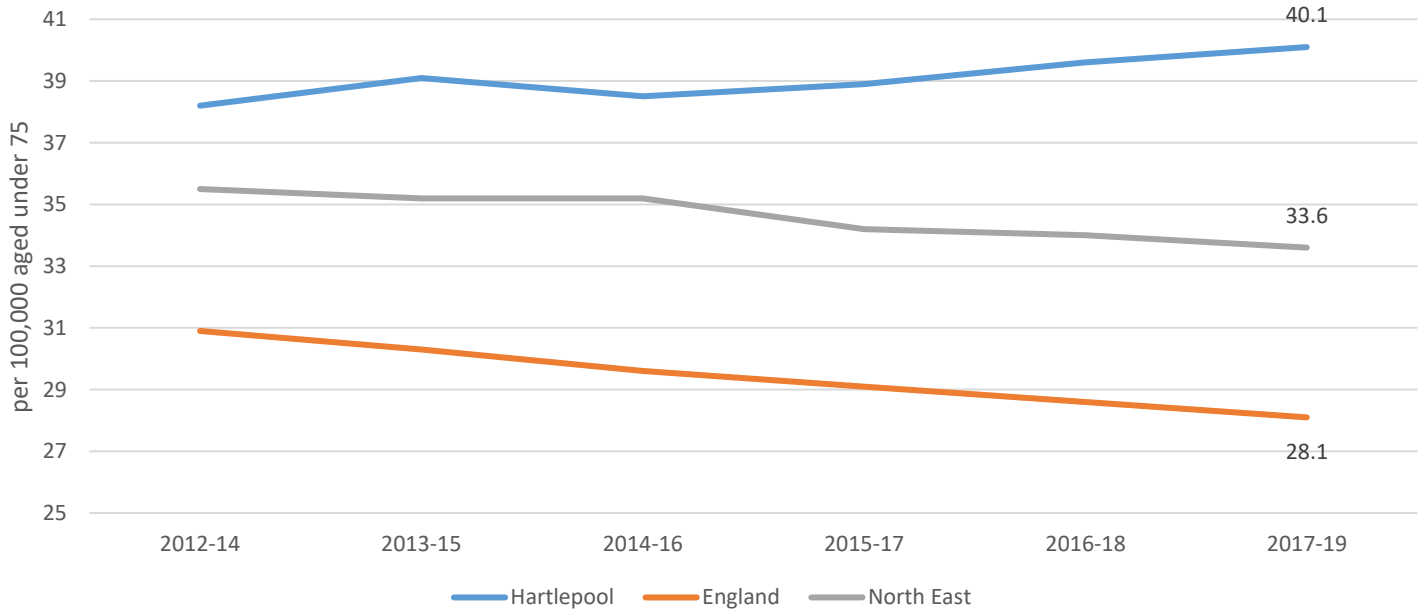
People aged under 75 years old in Hartlepool are more likely to die from either heart disease or stroke than England. These figures are getting worse in Hartlepool over time (despite improving in the North East and England).

Around 99 people died of heart disease or stroke for every 100,000 people aged under 75 in Hartlepool in 2017-19. This is higher than in 2012-14, when there were 90 deaths for every 100,000 people. In contrast, the death rates in the North East and England are lower (82 in 100,000 and 70 in 100,000) and falling over time. This means the gap between Hartlepool and the rest of the country is worsening. A similar pattern is visible in the rates for preventable deaths.

Under 75 mortality rate from cardiovascular disease



Preventable under 75 mortality rate from cardiovascular disease



Hospital admissions for falls

People aged 65 and over in Hartlepool, are less likely to be admitted to hospital because they have fallen than people in the North East or England and this has got better over time (1419 hospital admissions for falls per 1000 people aged 65 and over in Hartlepool vs around 2023 admissions per 1000 people in England).

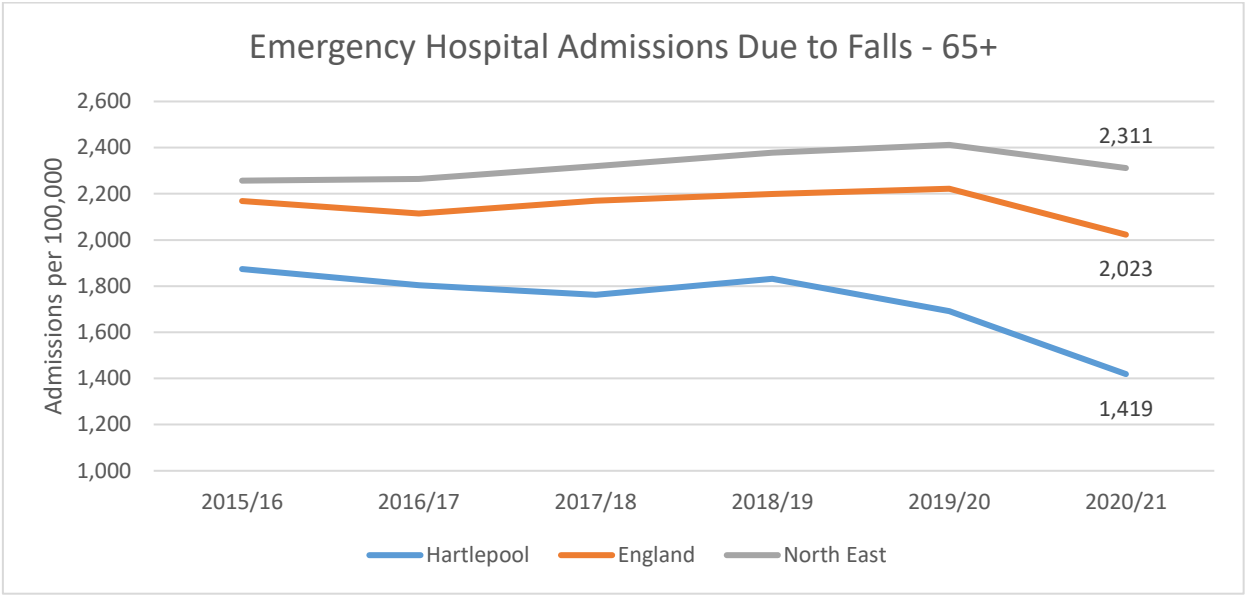
Another way to look at this is, in an “average” Hartlepool street of one hundred people aged 65 and over, around 1 person might be admitted to hospital each year. In an average street of one hundred people aged 65 and over in England, around 2 people might be admitted to hospital each year.

Number of people admitted to hospital due to a fall on an “average” Hartlepool street of one hundred people each year

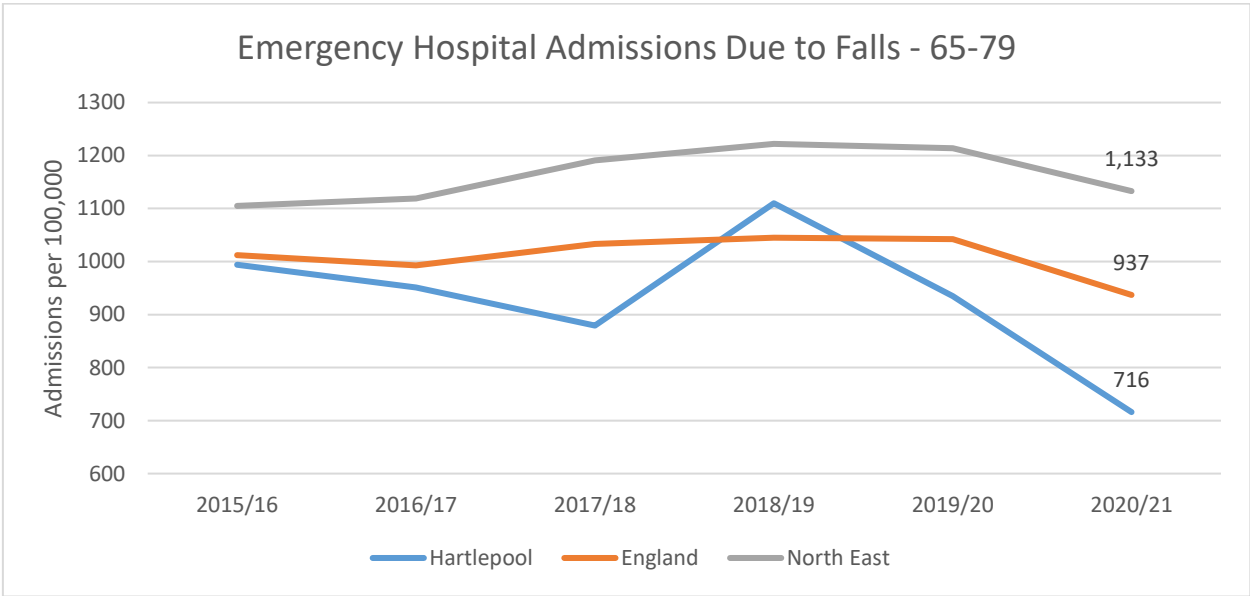


1 person admitted to hospital due to a fall on a street of 100 each year

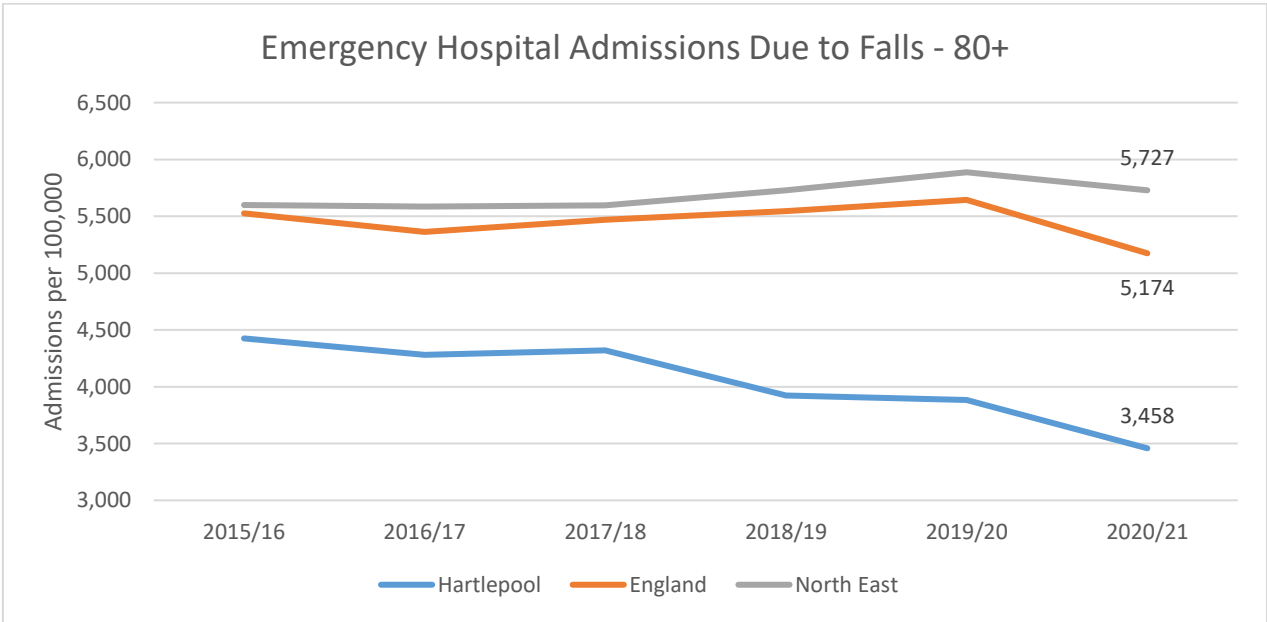
The graphs show Hartlepool has a declining trend in hospital admissions for falls in all of the elderly age brackets, 65+, 65-79 and 80+.



Source: HES/ONS/OHID 2022

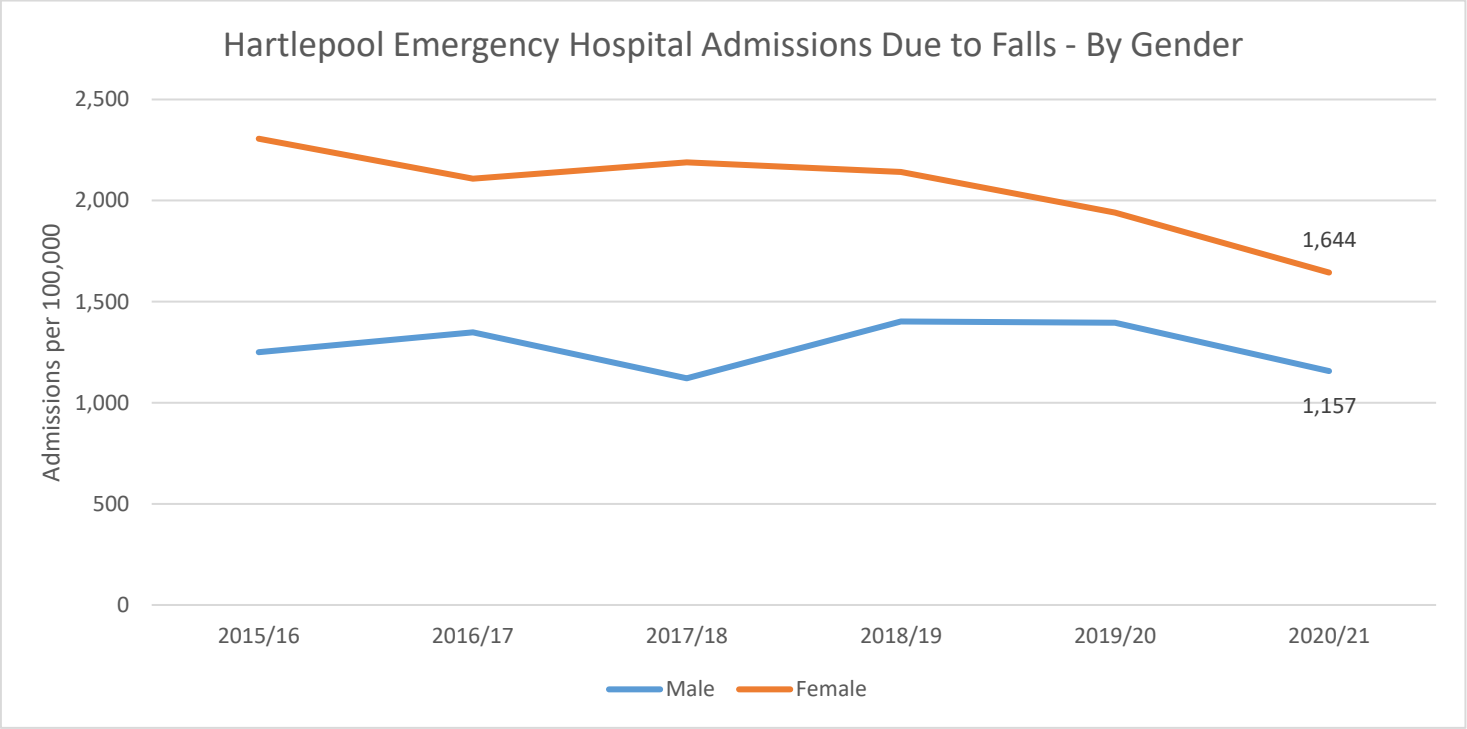


Source: HES/ONS/OHID 2022



Source: Source: HES/ONS/OHID 2022

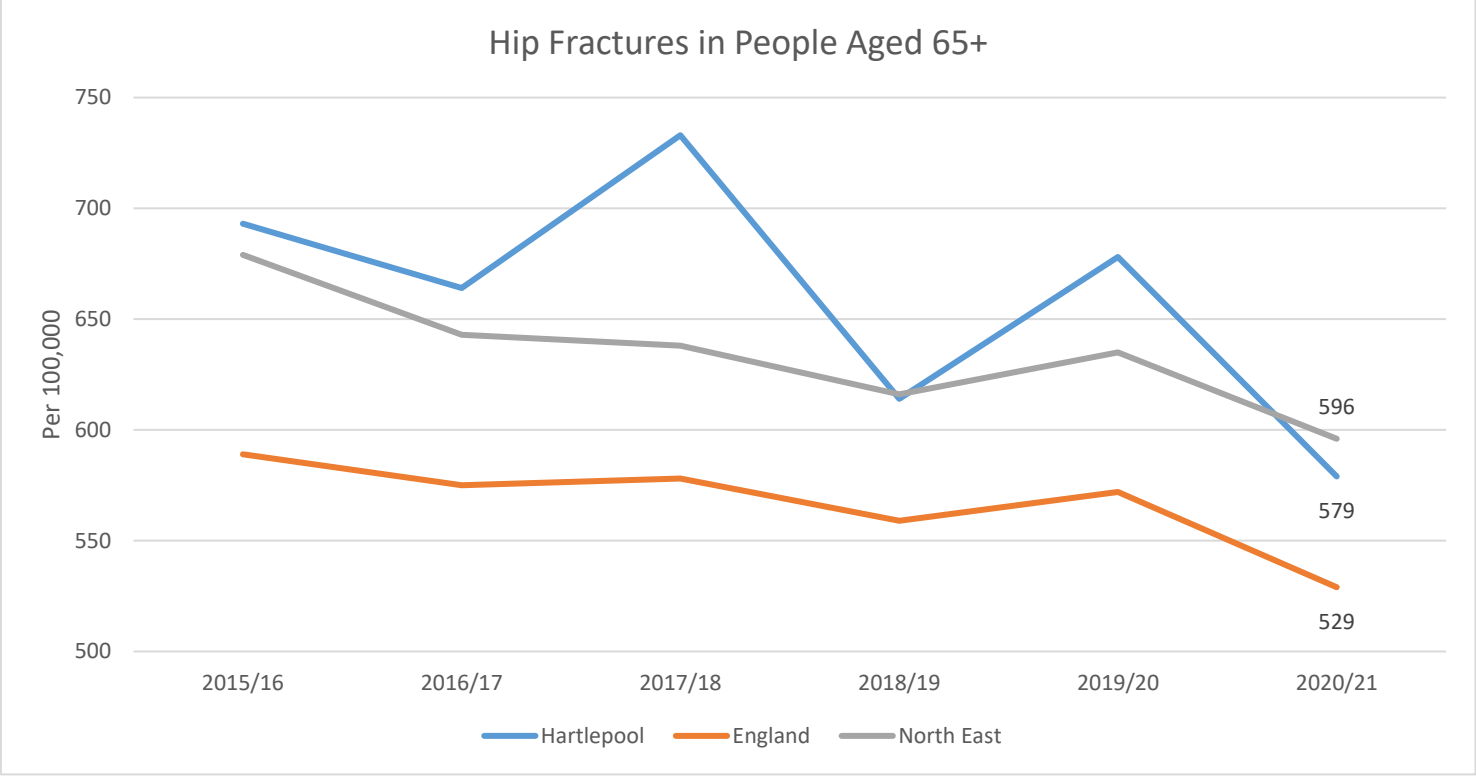
Within Hartlepool, the hospital admission rate is higher for females, but the gap between the genders is closing. Both male and female admissions show a declining trend.



Source: Source: HES/ONS/OHID 2022

Lower figures for hospital admissions for falls could reflect fewer falls or people being less likely to be admitted to hospital after a fall.

Hartlepool’s rate of hip fractures in those aged 65 and above, whilst on a declining trend, has had a series of peaks and troughs throughout the reporting period. Hartlepool’s latest rate is similar to the north east average, though both are above the England average.



Source: Source: HES/ONS/OHID 2022

Covid-19

Covid-19 has affected all ages but older people have been at greatest risk of death throughout the pandemic.

People in Hartlepool have been more likely to catch Covid-19 and die from it than people in England.

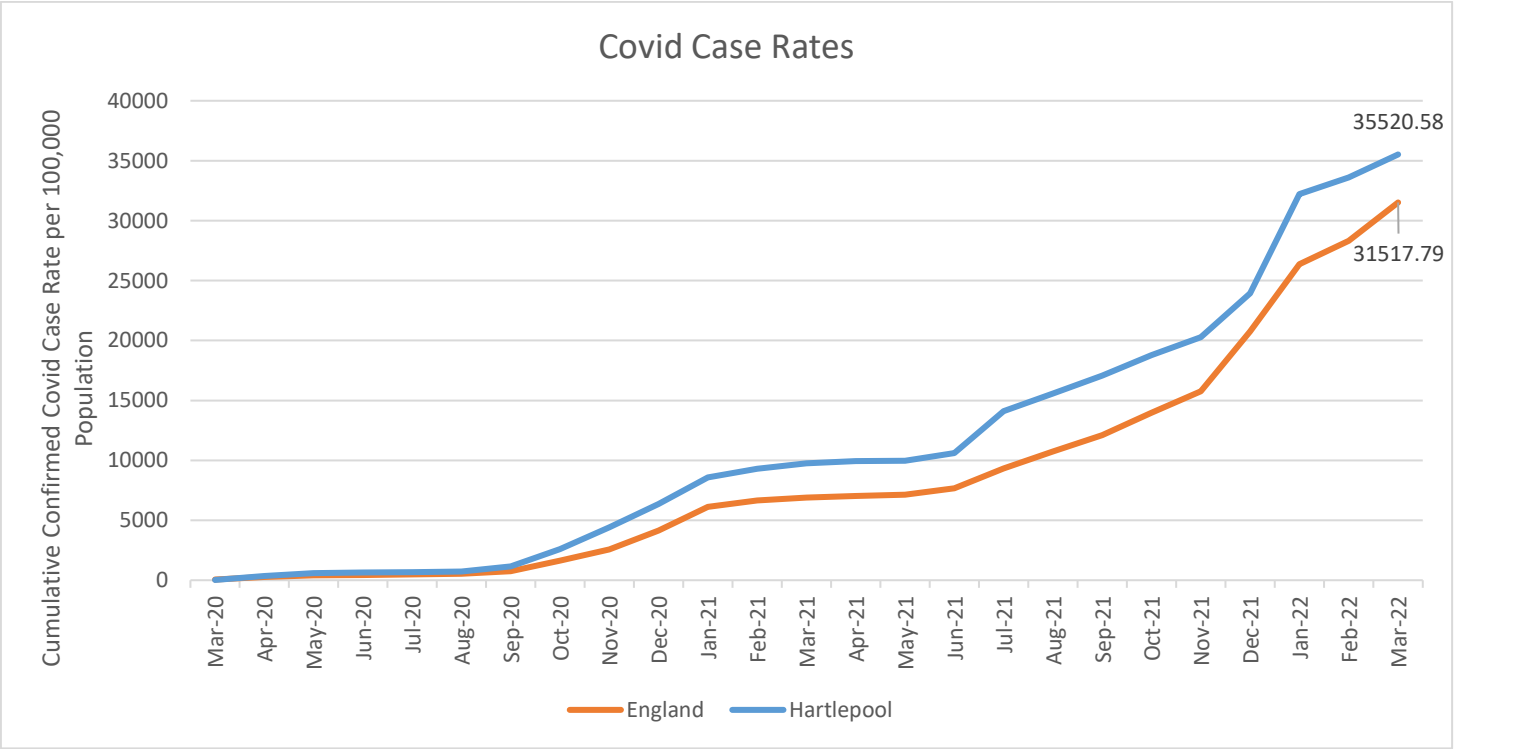
In an average Hartlepool street of 100 people, 36 people had tested positive for Covid-19 by March 2022 (when most free Covid-19 testing ended).

Number of people who had tested positive for Covid-19 on an “average” Hartlepool street of one hundred people by March 2022

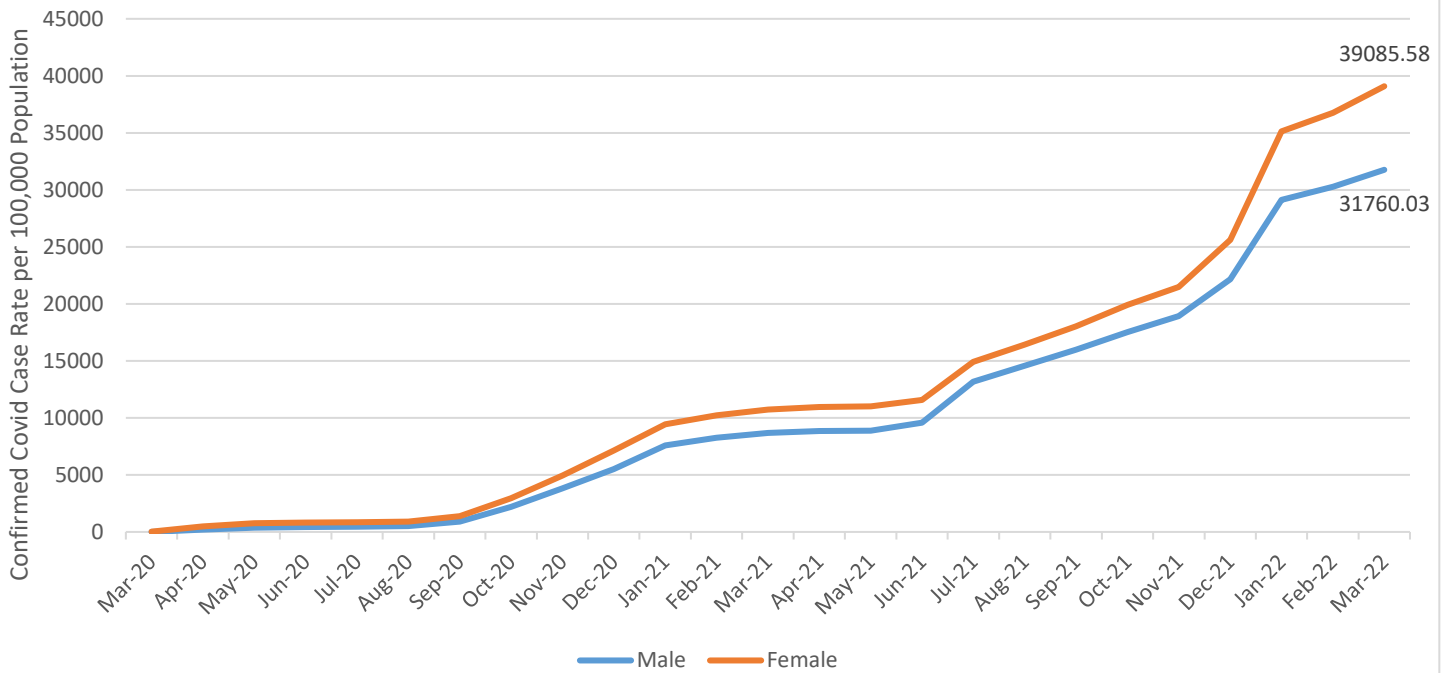


36 people who had tested positive for Covid-19 on a street of 100 by March 2022

In an average English street of 100 people, 32 people had tested positive. Women were more likely to catch Covid than men.

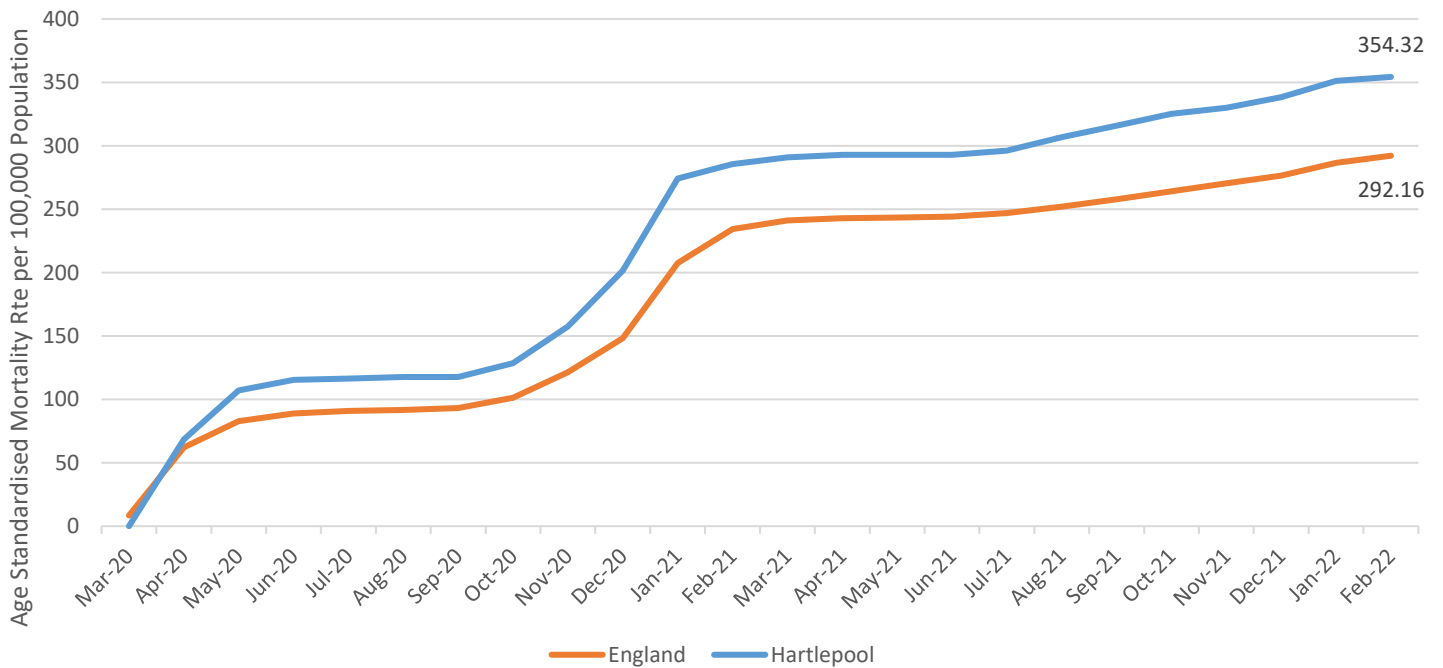


Covid Case Rate by Gender



By February 2022 there were 350 Covid-19 deaths per 100,000 people in Hartlepool compared to 290 deaths per 100,000 people in England.

Covid Death Rates



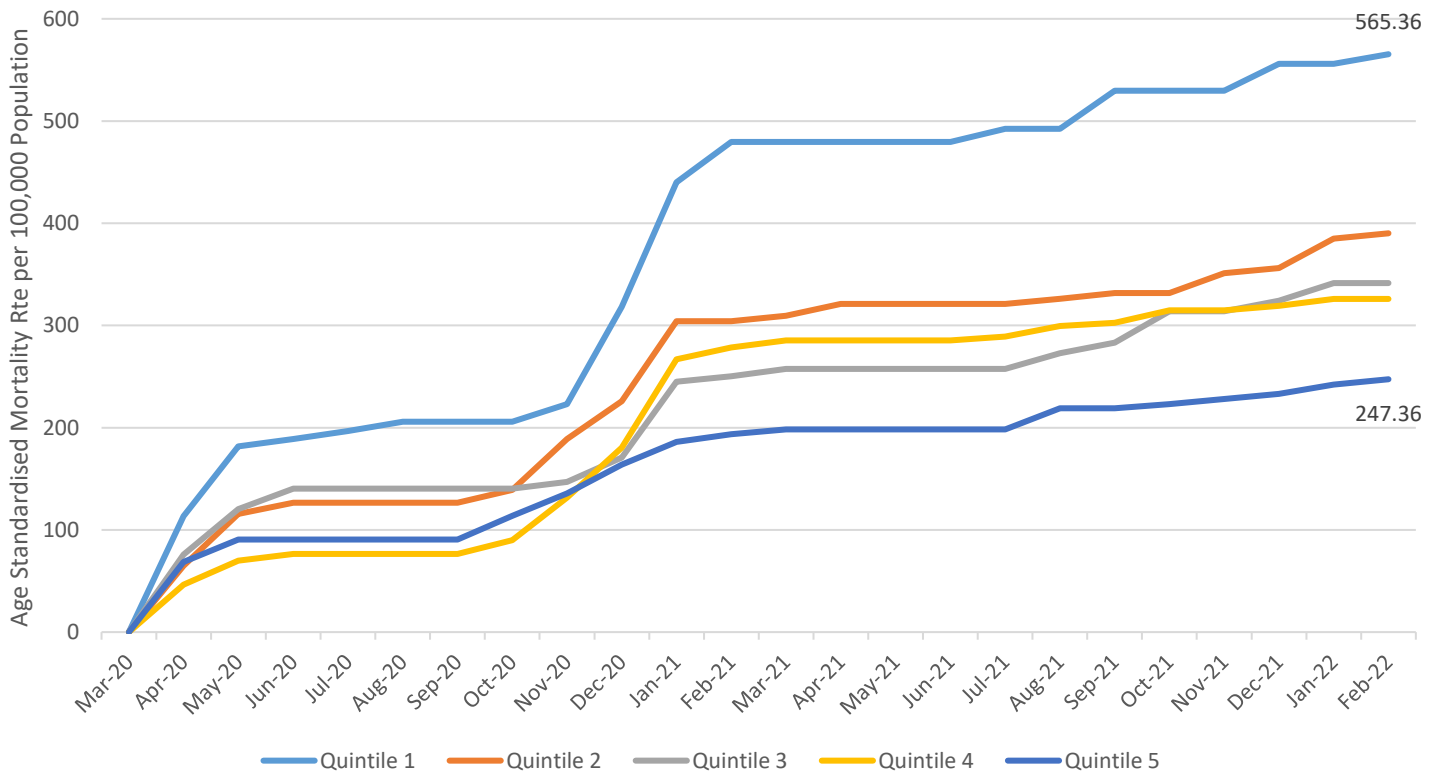
Source: CHIME 2022

Within Hartlepool, people living in poorer (more deprived) areas were more likely to die of Covid-19 than those in richer areas.

The graph divides Hartlepool into five groups (quintiles) depending on how rich or poor an area is and compares the death rates.

The death rate in the most deprived population (Quintile 1), was more than twice that of the least deprived population (Quintile 5).

Covid Death Rates by Deprivation Quintile



Source: CHIME 2022

Conclusion

This document outlines some additional data to provide a baseline summary of Hartlepool. It describes some of the challenges, and inequalities, in Hartlepool as well as some good news. There is always more data that can be analysed and new updates to data. The [Fingertips](#) tool from the Office for Health Improvement & Disparities offers up-to-date data on a range of Public Health measures.

As well as analysing data, it is important to act together to make a difference. The final section of the Director of Public Health Report discusses ways in which we can all work together to improve health and wellbeing in Hartlepool.

COUNCIL

15 December 2022



Report of: Monitoring Officer

Subject: PROPORTIONALITY REVIEW

1. PURPOSE OF REPORT

To approve the revised political balance calculations and allocation of seats on Committees in accordance with statutory requirements, following recent changes which alter the political balance between the Groups.

2. BACKGROUND

The Proper Officer was notified in accordance with the requirements set out in the Local Government (Committees and Political Groups) Regulations 1990 that Councillors Brown and Little wished to be treated as members of the Conservative and Independent Union Group.

Pursuant to Section 15 of the Local Government and Housing Act 1989 the authority is under a duty to review the allocation of seats to Political Groups as soon as practicable following a change to the membership of a political group

3. MAIN CONSIDERATIONS

The revised composition of the Council is shown below:-

COUNCIL – POLITICAL COMPOSITION FOLLOWING RECENT BY-ELECTIONS					
Seats	Conservative & Independent Union	Labour	Putting Seaton First	Hartlepool People Group	Independent
	19	13	1	2	1
Change	+2	-	-1	-1	-

Following the review, based on the above, the Committees upon which there is an impact are detailed below.*

FINANCE AND POLICY COMMITTEE – MEMBERSHIP OF 11 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	6	4	0	1	

Committees & Current Seat Allocations					Adjustment(s) Required
Finance and Policy Committee	6	4	1	0	-1 PSF +1 HPG

POLICY COMMITTEES – MEMBERSHIP OF 7 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	4	3	0	0	

Committees & Current Seat Allocations					Adjustment(s) Required
Adult Services	3	3	1	0	+1 Con/IU -1 PSF
Neighbourhood Services	2	3	0	2	+2 Con/IU -2 HPG
Economic Growth	3	3	0	1	+1 Con/IU -1 HPG

*No change to Children's Services Committee

OTHER AFFECTED COMMITTEES AUDIT AND GOVERNANCE COMMITTEE – MEMBERSHIP OF 10 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	5	4	0	1	

Committee & Current Seat Allocation					Adjustment(s) Required
Audit and Governance	4	4	1	1	+1 Con/IU -1 PSF

OTHER AFFECTED COMMITTEES CONSTITUTION COMMITTEE – MEMBERSHIP OF 9 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	5	3	0	1	

Committee & Current Seat Allocation					Adjustment(s) Required
Constitution Committee	3 (includes 1 vacancy)	3	1	2	+2 Con/IU -1 PSF -1 HPG

OTHER AFFECTED COMMITTEES LICENSING COMMITTEE – MEMBERSHIP OF 12 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	6	4	0	1	1 spare seat

Committee & Current Seat Allocation					Adjustment(s) Required
Licensing Committee	5	4	1	2	+1 Con/IU -1 PSF -1 HPG

OTHER AFFECTED COMMITTEES PLANNING COMMITTEE – MEMBERSHIP OF 11 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	6	4	0	1	

Committee & Current Seat Allocation					Adjustment(s) Required
Planning Committee	5	4	1	1	+1 Con/IU -1 PSF

OTHER AFFECTED COMMITTEES APPOINTMENTS PANEL – MEMBERSHIP OF 8 COUNCILLORS					
Seats	Con/IU	Labour	Former Putting Seaton First	Hartlepool People Group	
Target Following Review	4	3	0	0	1 spare seat

Committee & Current Seat Allocation					Adjustment(s) Required
Appointments Panel	3	3	1	1	+1 Con/IU -1 PSF -1 HPG 1 spare seat

OTHER AFFECTED COMMITTEES CIVIC HONOURS COMMITTEE – MEMBERSHIP OF 5 COUNCILLORS					
Seats	Con/IU	Labour	Putting Seaton First	Hartlepool People Group	
Target Following Review	3	2	0	0	

Committee & Current Seat Allocation					Adjustment(s) Required
Civic Honours Committee	2	2	0	1	+1 Con/IU -1 HPG

4. NOMINATIONS

The outcome of the review has been circulated to all the Leaders of all the Political Groups.

5. RECOMMENDATIONS

That Council:

- Approves the political balance calculation set out in the report;
- Approves the allocation of committee seats to political groups and agrees the membership of Committees.

6. REASON FOR RECOMMENDATIONS

To ensure that the council complies with its statutory obligations under the Local Government Housing Act 1989.



Report of: Constitution Committee

Subject: FURTHER PERIODIC REVIEW OF THE COUNCIL'S CONSTITUTION

1. PURPOSE OF REPORT

To enable Full Council to consider the recommendations of the Committee following a further periodic review of the Constitution.

2. BACKGROUND

This report follows the Committee's consideration of the recommendations of the Monitoring Officer, at the meeting of the Committee held on 21 November 2022.

3. PROPOSALS

The Committee has made a number of recommendations which are set out below:-

Parish Council Liaison Group

Since 17 August 2021, the Leader has been holding Parish Liaison Meetings. The Parish Council Liaison Meeting is an opportunity for Parish Councils in the Hartlepool area, to meet together to discuss issues of common interest.

The Committee agreed to formalise these meetings by adding a further role to the list set out in Article 6 – Leader of the Council as follows:

- (i) To chair meetings of the Parish Liaison Group with the Managing Director and the Chairs/Vice Chairs of the Parish Councils on a quarterly basis'

The Committee also noted that one of the items currently being discussed by the Parish Liaison Group is the agreement of a Charter / Deal between the Local Authority and the Parishes that lays out expectations for the operational relationship between both sides. A Parish Charter Working Group has been created to progress the development of the Parish Deal which is to be agreed by the Parish Liaison Group. Any changes/proposals recommended by the Working Group which has an impact on a Committee will be reported to the appropriate Committee.

Officer Employment Procedure Rule 12.1 - Other Officers – Appointments

The Committee were reminded that the Officer Employment Rules of Procedure set out the Authority's governance arrangements for the recruitment and dismissal of, and the taking of disciplinary action against, officers. The Majority of those rules relate to the Head of Paid Service, Directors and Chief Officers reporting directly to them. However, Section 12 relates to the appointment of 'Other Officers' as follows:-

“Appointment of all other Officers is the responsibility of the Head of Paid Service or his/her nominee, and may not be made by Elected Members. An invitation at the request of the Chair and/or Vice Chair of a relevant Committee to attend at the interview or otherwise be consulted on a Band 15 appointment would be permissible but the responsibility of appointment will solely rest with the Head of Paid Service or his/her nominee.”

The Committee agreed the deletion of the above paragraph.

Planning Delegations (Enforcement & Certificate of Lawfulness)

At present, decisions to issue an Enforcement Notice under the Planning Acts fall to be determined by members of the Planning Committee. At a recent meeting, the Planning Committee resolved that these matters should be determined at officer level.

The Council sometimes receive (Certificate of Lawfulness) applications to establish that development carried out is lawful under the Planning Acts or process formal applications to establish if or not a particular development would require planning permission. The Chief Solicitor has reviewed the current delegation provisions and is satisfied that it is appropriate to amend the same in order to provide clarification going forward.

The following amendments to the Scheme of Delegation were agreed:-.

- That any decision to issue an Enforcement Notice under section 172 of the Town and Country Planning Act 1990 (as amended) and the formulation and pursuance of the Council response to any subsequent appeal under section 174 of the Town and Country Planning Act 1990

(as amended) henceforth be delegated to the Director of Neighbourhoods and Regulatory Services in consultation with the Chief Solicitor and the Chair of Planning Committee.

- That consideration of an application for a Certificate of Lawfulness (Existing or Proposed) under sections 191 or 192 of the Town and Country Planning Act 1990 (as amended) and formulation and pursuance of the Council case at any subsequent appeal under section 195 of the Town and Country Planning Act 1990 (as amended) henceforth be delegated to the Director of Neighbourhoods and Regulatory Services in consultation with the Chief Solicitor and the Chair of Planning Committee.

5. OTHER PROPOSALS CONSIDERED

The Committee debated a proposal to include an additional clause in to the Council Procedure rules in relation to the financial implications of motions on notice. It was agreed that further work on the wording was required and would be brought back to a future committee.

6. RECOMMENDATIONS

That Full Council considers the recommendations of the Committee.

7. BACKGROUND PAPERS

Constitution Committee Report – 21 November 2022
Hartlepool Borough Council – Constitution (Part 4)

8. CONTACT OFFICER

Hayley Martin
Chief Solicitor
Hayley.martin@hartlepool.gov.uk
01429 523002

COUNCIL

15th December 2022



Report of: Finance and Policy Committee

Subject: HOUSING REVENUE ACCOUNT (HRA) BUSINESS PLAN UPDATE

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Budget and Policy Framework

2. PURPOSE OF REPORT

2.1 The purpose of the report is to enable Council to consider the recommendation from the Finance and Policy Committee in relation to HRA rent level for 2023/24.

3. BACKGROUND

3.1 The HRA is a separate ring fenced account and all costs have to be met from rental income. A HRA Business Plan report was considered by Finance and Policy Committee on 21st November 2022 (set out in **ANNEX A**) and covers two areas:

- **Rent Level 2023/24**

The report advised Members of the outcome of the Government's consultation proposals to change the existing national rent limits from a maximum of CPI plus 1%, to a lower fixed percentage increase.

The Government has confirmed a rent limit of 7% for 2023/24, which is lower than the previous regime which could have resulted in a rent limit of 11.1%.

The report advises Members that inflation will have an adverse impact on the HRA. Therefore, the report recommends a 5% rent increase – which is below the 7% limit set by the Government.

The recommended rent increase reflects the robustness advice detailed in the Finance and Policy Committee report and the requirements of the Local Government and Housing Act 1989 section 76, which requires Councils to ensure the HRA budget does not allow for the HRA Reserve to become 'overdrawn'.

Without this increase rental income will not be sufficient to cover expenditure and this will result in the HRA becoming unsustainable.

- **HRA Investment Programme,**

CONFIDENTIAL APPENDIX 1 This item contains exempt information under Schedule 12A Local Government Act 1972 (as amended by the Local Government (Access to Information) (Variation) Order 2006) namely, (para 3), information relating to the financial or business affairs of any particular person (including the authority holding that information) sets out the revised business cases for HRA capital schemes. This information is confidential as contract prices are still to be agreed and once this information is available details will be reported in the open part of a future HRA report. The Appendix shows that capital costs will be funded from capital grants (41%), Prudential Borrowing (39%) and Section 106 (20%).

The existing capital schemes will increase the HRA portfolio by 110 properties to 418 units, an increase of 36% on completion. Delivering this level of growth in the HRA will enable more people to live in good quality houses at affordable rents.

4. **RECOMMENDATIONS REFERRED BY FINANCE AND POLICY COMMITTEE FOR COUNCIL'S CONSIDERATION AND APPROVAL**

- 4.1 It is recommended that Council approve a rent increase of 5%.

5. **CONTACT OFFICER**

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Email chris.little@hartlepool.gov.uk
Tel: 01429 523003

Sign Off:-

- Director of Resources & Development ☒
- Chief Solicitor/Monitoring Officer ☒
- Managing Director ☒

FINANCE AND POLICY COMMITTEE

21st November 2022

Report of: Director of Resources and Development

Subject: HRA BUSINESS PLAN UPDATE

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Budget and Policy Framework.

2. PURPOSE OF REPORT

2.1 The purpose of the report is to enable Members to determine the 2023/24 rent level to be recommended to Council.

3. BACKGROUND AND ECONOMIC ENVIRONMENT

3.1 The HRA is a separate ring fenced account and all costs have to be met from rental income. There can be no cross subsidy between the HRA and General Fund Revenue Budget, and vice versa. The HRA is subject to specific Government regulations.

3.2 Until recently Government rent policy covered 5 financial years (2020/21 to 2024/25) and was expected to allow for annual rent increases to a maximum of 1% plus CPI inflation, as at September each year. This regime was designed to provide a sustainable financial base for HRAs, to support capital investment in further developments and to protect tenants from excessive increases. This regime was put in place before the current significant increase in inflation.

3.3 The Government issued a consultation (31st August) on a proposed rent cap for social housing rent increases, with options at 3%, 5% and 7% being considered. The government indicated a preferred option was 5%. In our response to the consultation we proposed the Government limit the increase to 3% to mitigate the impact on tenants and provide a recurring grant of 2% to mitigate the impact on HRAs.

3.4 The consultation closed on the 12th October and the government have not yet issued the 2023/24 rent cap limits. This report has been written based on the Government's preferred option of a 5% rent increase and should the outcome be any different, then the rent increase will be brought back to Finance and Policy Committee.

3.5 Economic Environment

- 3.6 Since the 2022/23 HRA budget was set the level of inflation has increased significantly and higher inflation will persist into 2023/24. Figures published on 17th August showed CPI (Consumer Prices Inflation) at 10.1% and RPI (Retail Prices Inflation) at 12.3% and figures published on 14th September shows CPI at 9.9% and RPI unchanged. The latest update from the Bank of England (22 September 2022) expects inflation to peak at 11% in October and then remain above 10% for a few months before starting to reduce.
- 3.7 In response to the significant increase in inflation the Bank of England have implemented a series of increases in interest rates which have seen the rate increase from 1% in May 2022 to 2.25% from 22nd September, to 3% in November. There is an expectation further increases will be made over the next few months. These increases have impacted on Public Works Loans Board (PWLB) long term borrowing rates, which have also increased.
- 3.8 Inflation and increasing interest rates clearly have an adverse impact on the HRA as the sole source of funding is rental income. Additionally, there is no scope to cut services if the Council is to maintain services to tenants and ensure the housing stock remains in good condition and is sustainable.
- 3.9 The HRA investment plans are also adversely impacted by inflation and increasing interest rates and this is assessed in detail later in the report.

4. HRA 2022/23 FORECAST OUTTURN

- 4.1 The approved HRA budget forecast a £14,000 surplus – which equates to 1% of operating costs of £1.4m. At the time the HRA budget was prepared this provided a small degree of potential financial flexibility to manage inflation pressures.
- 4.2 The significant and rapid increase in inflation will adversely impact on the HRA as the current high level of inflation significantly exceeds the 2022/23 budget planning assumptions. It is anticipated that the outturn will be a deficit of £8,000, which will need to be funded from the HRA Reserve. Officers will continue to manage expenditure closely to minimise the year end deficit.

5. HRA FORECAST 2023/24

- 5.1 As highlighted below, the operating costs of the HRA consist of two broad categories and the impact of inflation will be different for these areas:

- **Repairs and maintenance, supervision, management, major repairs allowance and other operating costs - £0.991m (67%)**

Inflation will be a significant issue for these costs and whilst the impact should not be as high as CPI, as the HRA will not face direct energy inflation, it will be impacted by other inflation.

The HRA budget for 2023/24 will need to make provision for permanent increases arising from inflation in 2022/23 and further inflation in 2023/24. A careful assessment of inflation impacts on the HRA has been made and a 10% increase is needed to cover 2022/23 and 2023/24 cumulative inflation.

This is below the current single year CPI figure for July of 10.3% and around the bank of England forecast year end figure of above 10%; expected from October for a few months. As inflation will continue into 2023 this is a prudent assessment, although subject to risk that actual inflation may be higher and reflects the following factors:

Supervision and Management inflation

The recent national pay offer for all council staff, including those working on HRA activities, is a flat rate increase of £1,925 from April 2022. This results in higher percentages increases for the lowest paid staff most affected by inflation and results in increases of between 10% and 3.5% (2% or less for Assistant Directors and Directors).

The April 2022 increase for staff working on the HRA averages 7%, which is 5% more than the forecast included in the base budget.

As the April 2022 pay award has only recently been agreed the National Employers Organisation had previously indicated they want to commence the negotiations for 2023 as soon as possible. This will be driven by changes in the National Living Wage and inflation – which suggests either a similar fixed increase for all staff (amount to be determined), or higher percentage increases for lower paid staff.

Repairs and maintenance, major repairs allowance and other operating cost

These areas will be more impacted by the level inflation peaks at and the ongoing level in 2023/24.

- **Interest payment - £0.478m (33%)**

For 2023/24 this budget will not be impacted by inflation or increasing interest rates. Beyond 2023/24 higher inflation and interest rates will impact on the cost of further capital investment. As increases in rental income will not meet the higher capital costs of providing additional properties, or the impact of higher interest rates, increased funding from capital grants and / or section 31 contributions will need to be secured. These issues are being assessed and details will be reported to a future meeting of the impact in 2024/25 and future years.

5.2 The following table summarises the recommended 2023/24 HRA budget and shows:

- An inflation requirement of £99,000 for 2022/23 recurring inflation and forecast 2023/24 inflation.

- The rent increase and interest income assumptions will provide recurring funding of £85,000. This is £14,000 less than the inflation requirement as this is the recurring surplus from 2022/23 available to offset higher inflation.

Recommended 2023/24 HRA Budget

	2022/23 Budget £'000	Inflation /(rent increase)	2023/24 Budget £'000
Dwelling Rents and other income	(1,483)	(75)	(1,558)
Additional Investment Income		(10)	(10)
Repairs and maintenance, Supervision, management, major repairs allowance and other operating costs	991	99	1,090
Interest and loan repayments	478	0	478
Total Expenditure	1,469	99	1,568
Deficit / (Surplus)	(14)	14	0

- 5.3 The councils required rent increase to cover inflation and maintain a balanced HRA is 5.7%. On the basis that the government set a 5% rent cap this would leave a £10,000 deficit. This can be mitigated by budgeting for additional investment income owing to the higher interest rates. Whilst it is expected the extremely low interest rates of the previous decade will not continue and rates will be higher than this level there remains a potential risk should investment interest rates reduce from current levels. This risk will be more manageable as the HRA properties number increase.

6. Robustness Advice

- 6.1 The Local Government and Housing Act 1989 section 76 requires that Councils must ensure that the HRA budget does not allow for the HRA Reserve to become 'overdrawn'.
- 6.2 To ensure this position does not arise a robust approach is taken to assess forecast HRA income and costs. On this basis the recommended 5% rent increase provides a robust and sustainable basis for the HRA and the continued delivery of the Council's housing objectives.
- 6.3 As rent limits are set on an annual basis 'use it or lose it basis' the HRA cannot recover income with higher rent increases in future years. For 2023/24 this is a more critical issue than in previous years owing to the current level of inflation. Increasing rents below the recommended 5% results in a permanent reduction in income. The recommended

increase is designed to ensure the HRA remains financially sustainable.

- 6.4 If rents are not increased the HRA will become unsustainable and the Council will be unable to achieve the planned expansion in the numbers of homes provided through the HRA.
- 6.5 There is also a much greater risk than in previous years that inflation continues at a higher level during 2023/24, which underlines the need to increase rents. If inflation over the period 2022/23 and 2023/24 was 2% more than forecast this would result in a budget deficit for 2023/24 of nearly £20,000. Whilst this amount is relatively low this would be a recurring annual impact and over five years would wipe out 20% of the HRA reserve of £495,000.
- 6.6 As reported previously the HRA Reserve is at the minimum recommended level and needs to be maintained to manage financial risk relating to inflation and the planned growth of the HRA over the next few years.

6.7 Impact on tenants

- 6.8 Rents were frozen in 2020/21 and 2021/22 and this has reduced recurring rental income by £59,000. For tenants this means average rents are £3.71 per week less than they would have been if they had not been frozen in these years. This is a permanent benefit for tenants, although a permanent reduction in HRA income.
- 6.9 It is recognised that the recommended 2023/24 rent increase will impact on households at a time of increasing inflation and other costs. The rent increase will generate £75,000 and result in an average weekly increase of £5.31. Over the period 2020/21 to 2023/24 the cumulative rent increase is 40% less than the rent limit.
- 6.10 In previous years the Government have provided additional funding for those tenants receiving housing benefit and Universal Credit. The Government has not yet confirmed if benefits will be uplifted for inflation, which would provide a 10% increase. It seems extremely unlikely that the benefit increase will not be at least 5%. Approximately two thirds of the council's HRA tenants are in receipt of benefits and previously had all or part of their rent increase funded by the Government.

7. HRA INVESTMENT PROGRAMME

- 7.1 Prior to 2023/24 the HRA had operated in a low inflation, low interest rate environment that provided a period of financial stability. This provided financial certainty for business planning, allowing opportunities for capital investment and development to grow HRA property numbers.
- 7.2 The previous HRA report outlined ambitious proposals to increase the size of the HRA. The financial planning was based on securing Homes

England capital grant funding, which is then matched with prudential borrowing and use of section 106 funding.

- 7.3 The current economic climate of higher interest rates than forecast (PWL B 4.3%) and the significant increase in inflation (10.1% September 2022) has meant that existing business cases need to be reviewed.
- 7.4 In order to mitigate the impact of increased interest rates and ensure prudential borrowing revenue costs remain affordable for the HRA it will be necessary to reduce the amount of prudential borrowing. This can only be achieved by increasing the amount of section 106 developer contributions applied to the schemes. The total amount of currently available section 106 funding is £2.176m and this will all need to be allocated to fund existing schemes.
- 7.5 **CONFIDENTIAL APPENDIX 1 This item contains exempt information under Schedule 12A Local Government Act 1972 (as amended by the Local Government (Access to Information) (Variation) Order 2006) namely, (para 3), information relating to the financial or business affairs of any particular person (including the authority holding that information** sets out the revised business cases for HRA capital schemes. This information is confidential as contract prices are still to be agreed and once this information is available details will be reported in the open part of a future HRA report. The Appendix shows that capital costs will be funded from capital grants (41%), Prudential Borrowing (39%) and Section 106 (20%).
- 7.6 The existing capital schemes will increase the HRA portfolio by 110 properties to 418 units, an increase of 36% on completion.
- 7.7 Delivering this level of growth in the HRA will enable more people to live in good quality houses at affordable rents. The scale of managing the delivery of this significant increase in the HRA cannot be underestimated and will need careful management to ensure:
- Planned developments are delivered on time and budget;
 - Properties are successfully let and tenants become assimilated into their new community.

8. OTHER CONSIDERATIONS

Legal Consideration	The Council is required to comply with HRA regulations. Which includes the requirement to set a balanced HRA budget in line with the information as set out in the Robustness Advice.
Risk Considerations	The level of Right To Buy (RTB) sales and therefore risk to the HRA resources has increased as the cost floor protection on the first tranche of new build properties has expired and the council have had two sales to date. Whilst this matter requires further assessment, it is offset by the current economic climate and the impact on tenants' financial ability to purchase using a mortgage. These issues will continue to be kept under review.
Staff Considerations	No relevant issues
Consultation	No relevant issues
Child/Family Poverty Considerations	Providing affordable homes will go towards addressing family poverty.
Equality and Diversity Considerations	Increasing rents clearly impacts on all households. The decision to retain a 12% LCTS scheme will support the most financially vulnerable households.
Section 17 of the Crime and Disorder Act 1998	Empty homes can become blight areas and become a target for arson and dumping of rubbish as well as various types of anti-social behavior. Therefore the ongoing regeneration and refurbishment of empty properties to bring these empty properties back into use is likely to contribute to reductions in crime and anti-social behavior.
Asset Management	MHCLG guidance in 'Implementing Self-financing for Council Housing' requires the Council to have a business plan for the HRA, which will be updated to reflect the recommendation in this report regarding rent levels.

9. CONCLUSION

- 9.1 The HRA is a standalone account and entirely reliant on rental income to fund revenue costs, including interest costs on borrowing used to fund capital investment and to fund property repairs and maintenance. In the initial years of operating the HRA there was a period of significant financial challenge.
- 9.2 Prior to this year the HRA had operated in a low inflation and low interest environment which provided a sustained period of financial stability. This has now changed owing to the significant increase in inflation and expectation inflation and interest rates will remain higher for longer. This is severely impacting on the HRA business model and ability to fund capital investment using Prudential Borrowing.

- 9.3 In response to inflation the Government are proposing to change the previously announced four year rent policy, which was based on annual rent increase of a maximum of CPI plus 1%. The government have proposed a new limit to apply to 2023/24 and indicated a preferred option of 5%. The outcome of the consultation is yet to be published, however this report is based on the proposed 5% being confirmed.
- 9.4 The proposals in the report are designed to ensure the HRA remains sustainable and further investment to provide additional affordable homes can continue, whilst managing increasing financial risk.

10. RECOMMENDATIONS

- 10.1 Note the report and the adverse impact inflation is having on the HRA and the adverse impact of higher interest rates on borrowing costs;
- 10.2 Note that in the response to the Government's rent consultation we proposed the Government should limit the increase to 3% to mitigate the impact on tenants and provide a recurring grant of 2% to mitigate the impact on HRAs.
- 10.3 Approve the recommended 5% rent increase for 2023/24 and refer this proposal to Council; this reflects the robustness advice detailed in section 5. Note in the event the Government sets a lower limit a further report will be submitted as this will impact on the sustainability of the HRA and the ability to undertake planned capital investment.
- 10.4 Note the impact of interest rate increases on the capital programme and approve the increased use of Section 106 contributions as detailed in the report, which fully commits the available £2.176m

11. REASONS FOR RECOMMENDATIONS

- 11.1 To enable 2023/24 rents to be set.

12. BACKGROUND PAPERS

- 12.1 Housing Revenue Account – Financial Business Plan Update - Finance and Policy Committee, 14 February 2022.

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Sign Off:-

- Director of Resources & Development ☒
- Chief Solicitor/Monitoring Officer ☒
- Managing Director ☒



Report of: Finance and Policy Committee

Subject: SEATON CAREW PUBLIC CONVENIENCES

1. TYPE OF DECISION/APPLICABLE CATEGORY

Budget and Policy Framework.

2. PURPOSE OF REPORT

- 2.1 To enable Council to consider the Finance and Policy Committee's recommendation for the use of prudential borrowing as part of funding strategy for Seaton Carew Public Conveniences and to increase the Prudential Borrowing Limits accordingly.

3. BACKGROUND

- 3.1 In accordance with the Constitution the Finance and Policy Committee is responsible for proposing changes to the approved Budget and Policy Framework, which are then referred to Council for consideration.
- 3.2 At its meeting on the 21st November 2022 the Finance and Policy Committee considered proposals to build a new Public Conveniences facility at Seaton Carew, including the potential purchase of Beach Huts. An extract of the Finance and Policy Committee Report is included at Appendix A, including the approved recommendations.
- 3.3 Total funding for the scheme includes £95,000 from Changes Places Fund, £130,000 NIP funding with £290,000 being required to be met from prudential borrowing. The annual loan repayment costs will be self-funded from a combination of saving in water costs and a 30p charge to use the toilet facility.
- 3.4 Approval is sought from Council in relation to the borrowing component of the funding strategy.

4. RECOMMENDATIONS

- 4.1 It is recommended that the Council approve the borrowing of £0.290m to match fund grants secured of £0.225m
- 4.2 On the basis of Council approving the above recommendations to approve the inclusion of this scheme within the Capital Programme and Prudential Indicators.

5. BACKGROUND PAPERS

- 5.1 Medium Term Financial Strategy (MTFS) 2023/24 to 2024/25, Finance and Policy Committee 21st November, 2022

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Managing Director



Director of Resources and Development



Chief Solicitor



APPENDIX A

Extract from Medium Term Financial Strategy (MTFS) 2023/24 to 2024/25 reported (paragraph reference refers to the numbering used in the Finance and Policy Committee report)

8. CAPITAL ISSUES

- 8.1 These will be addressed in the December MTFS report. There is one issue which needs a decision in relation to the proposed development of toilet facilities at Seaton Carew.
- 8.2 The existing toilet facilities at Seaton Carew are housed in a listed building which is nearly 90 years old making them difficult to maintain owing to the restrictions associated with it being a listed building. This makes any sort of refurbishment works very expensive meaning the existing condition of the building fabric requires high levels of maintenance. The structure is subject to a number of issues including:
- Water ingress and flooding
 - Poor ventilation and unpleasant smells
 - Vandalism and anti-social behaviour which is difficult to address
 - Poor inclusive/disabled facilities
 - Significant water usage owing to age and inaccessible, inefficient fittings
- 8.3 Funding of £200,000 had been identified to make improvements to the existing facility (£130,000 from Neighbourhood Investment Programme and £70,000 from Changing Places Fund), however any works will have a minimal positive affect on the overall aesthetics of the facility. It is therefore proposed that a new facility is built improving Public Convenience provision at Seaton Carew closer to the main car park for visitors to use on arrival and when leaving.
- 8.4 The cost of a proposed new building are anticipated to be approximately £435,000 and would incorporate:
- 9 x standard toilets,
 - 2 x DDA compliant toilets
 - 1 x room for cleaners
 - Changing Places Facility
- 8.5 This would unlock additional Changing Places Funding of £25,000, and it is proposed that prudential borrowing is used to fund the remaining £210,000. The cost of borrowing is approximately £15,000 per year, which can be met through savings in relation to water usage of approximately £7,000 with the balance met from implementing a charge to use the facilities. Car parking transactions have been used as a basis to estimate potential usage. It is estimated that a 20p charge per use would generate £8,000 of fee income. In summary the proposed funding would be as follows:

- £130,000 NIP Funding
- £95,000 Changing Places Fund (original £70k plus additional £25k)
- £210,000 Borrowing
- £435,000 TOTAL

- 8.6 The Council has been approached by the operator of the Beach Huts who wishes to sell these, or if this is not possible to relocate them outside of Hartlepool. Retention of the Beach Huts would complement the development of improved toilet facility and wider offer at Seaton Carew. The income stream from the Beach Huts is dependent on the weather and as this income cannot be guaranteed it is recommended the additional borrowing costs could be funded by having a 30p charge for the toilet facilities.
- 8.7 Estimated borrowing costs are based on current interest rates. If rates increase then the business case will have to be reviewed and a higher charge implemented to meet any additional costs.
- 8.8 This proposal will also allow for other uses for the Clock Tower structure. The building will continue to have an active use and could potentially act as focal point and centre piece for Seaton. This has been included in the scope of the masterplan work that is currently ongoing. It would also enable the existing toilets to remain in use while the new facilities are built, meaning the area would not be without any toilet facilities in Seaton at any point.

11. RECOMMENDATIONS APPROVED BY FINANCE AND POLICY COMMITTEE

- 11.1 Finance and Policy Committed approved the following recommendations:
- v) Approved the Public Conveniences capital scheme, including provision to purchase the Beach Huts, and approve implementation of a 30p charge to meet part of the Prudential Borrowing repayment costs and seek Council approval for the Prudential Borrowing for £0.290m.
 - vi) Delegated authority to the Managing Director, in consultation with the Chair of Finance and Policy Committee, Director of Resources and Development and Chief Solicitor to negotiate the purchase of the Beach Huts with the business case detailed in recommendation (v).



Report of: Managing Director

Subject: BUSINESS REPORT

1. RESIGNATION FROM OUTSIDE BODIES

Councillor Cassidy has notified me that he wishes to resign as the Council's representative from the following outside bodies:-

- Northumbria Regional Flood and Coastal Committee
- Local Government Association Coastal Special Interest Group
- River Tees Port Health Authority

Nominations are sought for replacement representatives.

2. SPECIAL URGENCY DECISIONS

In accordance with the requirements of the Access to Information Procedure Rules included in the Council's Constitution, Full Council is informed that no special urgency decision were taken in the period August 2022 – October 2022.