

FINANCE AND POLICY COMMITTEE

AGENDA



Monday 18 September 2023

at 10.00 am

**in the Council Chamber,
Civic Centre, Hartlepool.**

MEMBERS: FINANCE AND POLICY COMMITTEE

Councillors Boddy, Brown, Buchan, Feeney, Hall, Harrison, Lindridge, Little, Martin Wells, Morley and Young.

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

- 3.1 To receive the minutes of the meeting of the Finance and Policy Committee held on 3 July 2023.
- 3.2 To receive the minutes of the meeting of the Health and Wellbeing Board held on 20 March 2023.

4. PUBLIC QUESTION

On the 13th of July I attended my first council meeting in 63 years, specifically to observe the agenda item about allotment rents. At the meeting members on both sides congratulated themselves for a successful Tall Ships weekend and suggested that we will do it again in the future. In 2009 the Tall ships event cost the council around £4 million pounds so it is reasonable to expect this event to cost £5M+, yet, as was discussed briefly at the meeting, child poverty in Hartlepool is at an extremely high level, and budgets are unbelievably stretched. My question is this; Will the council make a commitment to not hold any such major events costing, millions of pounds, of our tight budget, while we lead the way in child poverty.

Mr S Cosgrove

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.

5. BUDGET AND POLICY FRAMEWORK ITEMS

- 5.1 Strategic Financial Management Report - as at 30th June 2023 – *Director of Finance, IT and Digital*
- 5.2 Local Council Tax Support 2023/24 – *Director of Finance, IT and Digital*

6. KEY DECISIONS

- 6.1 Tobacco Control Draft Strategy – *Director of Public Health*
- 6.2 Highlight Leisure Facility – *Executive Director of Adult and Community Based Services and Director of Finance, IT and Digital*
- 6.3 Sale of Gladstone House – *Executive Director of Development, Neighbourhoods and Regulatory Services*

7. OTHER ITEMS REQUIRING DECISION

- 7.1 Audit and Governance Committee Investigation - Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions – Results of Additional Consultation – *Chair of the Audit and Governance Committee*

8. ITEMS FOR INFORMATION

- 8.1 Petition – *Managing Director*
- 8.2 Developing the New Council Plan 2024-2029 – Proposed Timetable and First Stage Consultation Process – *Managing Director*
- 8.3 Corporate Complaints Monitoring Report for 2022/23 – *Monitoring Officer*
- 8.4 Corporate Procurement Quarterly Report on Contracts - *Executive Director of Development, Neighbourhoods and Regulatory Services*

8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

For Information:

Dates and times of forthcoming meetings of the Finance and Policy Committee –

Monday 27 November, 2023 at 10.00 am
Monday 22 January, 2024 at 10.00 am
Monday 19 February, 2024 at 10.00 am



FINANCE AND POLICY COMMITTEE

MINUTES AND DECISION RECORD

3 JULY 2023

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool.

Present:

Councillor Mike Young (In the Chair)

Councillors: Moss Boddy, Bob Buchan, Tom Feeney, Gerard Hall, Brenda Harrison, Jim Lindridge, Sue Little, Andrew Martin-Wells and Melanie Morley.

Also Present: Councillor Steve Wallace, Vice-Chair of Audit and Governance Committee
Stephen Thomas, Hartlepool HealthWatch.

Officers: Denise McGuckin, Managing Director
Hayley Martin, Director of Legal, Governance and Human Resources
James Magog, Director of Finance, IT and Digital
Sally Robinson, Executive Director of Children's and Joint Commissioning Services
Craig Blundred, Director of Public Health
Jill Harrison, Executive Director of Adult and Community Based Services
Tony Hanson, Executive Director of Development, Neighbourhoods and Regulatory Services
Joan Stevens, Scrutiny Manager
David Cosgrove, Democratic Services Team

1. Apologies for Absence

Councillor Paddy Brown.

2. Declarations of Interest

None.

3. Minutes of the meeting held on 13 March 2023

A Member referred to Minute No. 108 'Equality, Diversity and Inclusion Policy' and asked if all staff had been informed of the new policy and if it was to be used as part of Member training on this issue, which the Member considered needed to be more robust. The Managing Director indicated that an action plan was being developed to go alongside the new policy and

this would include training for all employees and elected Members provided by NEREO. There would also be revised equality monitoring forms, which would also incorporate child and family poverty and all the characteristics included within the new policy as suggested by the LGA Corporate Peer Review.

Minutes received.

4. Minutes of the meeting of the Safer Hartlepool Partnership held on 6 March 2023

Received.

5. Final Outturn 2022/23 *(Director of Finance, IT and Digital)*

Type of decision

Budget and Policy Framework.

Purpose of report

To provide details of the final outturn position for 2022/23 financial year.

Issue(s) for consideration

The Director of Finance, IT and Digital presented a detailed report setting out the final budget outturn position, building on the in-year monitoring information received at prior meetings. The outturn position corresponds to the position set out in the statement of accounts. The final revenue outturn position is a net overspend of £0.962m after earmarking of reserves for specific purposes.

The Director outlined the main aspects of the General Fund Revenue Outturn highlighting the budgetary issues for each department. The report also set out details of the Housing Revenue Account, Income collection and the Collection Fund, and the Capital Budget Outturn. The Director also reported on two urgent decisions that had been taken in respect of capital schemes relating to property acquisition as part of the Screen Industries Production Village Scheme and the Hartlepool Magistrates Courts and Probation building.

Members queried the capital programme schemes for schools that were academies. The Executive Director of Children's and Joint Commissioning Services commented that these will have been schemes agreed before the schools became academies for which grant funding had been obtained and therefore, the Council had honoured those programmes of work. All future capital grant funding would go direct to the schools. There was also discussion around the existence of asbestos in schools and the appropriate safeguards around that. The Executive Director of Development,

Neighbourhoods and Regulatory Services stated that there were surveys and risk assessments carried out which identifies where asbestos exists in all school sites managed by the Council and these are shared with the schools.

The Chair requested that consideration of the specific write-off set out in the confidential Appendix N to the report be considered by the Committee at the end of the meeting.

The following decisions were agreed without dissent.

Decision

1. That the final 2022/23 outturn position of £0.962m overspend and the accompanying financial performance for the year, including decisions undertaken for urgency be noted;
2. That the final 2022/23 outturn in relation to the Housing Revenue Account detailed within Section 5 of the report be noted;
3. That the capital outturn position detailed within Section 7 of the report be noted.
4. That the write offs as detailed in Section 6 of the report be approved.

6. Medium Term Financial Strategy (MTFS) 2024/25 to 2026/27 *(Director of Finance, IT and Digital)*

Type of decision

Budget and Policy Framework.

Purpose of report

The purpose of the report was to provide an update on the Council's financial position and enable Members to approve the timetable for the 2024/25 budget.

Issue(s) for consideration

The Director of Finance, IT and Digital presented a detailed report setting out the updated MTFS position for the three year position 2024/25 to 2026/27. The Council faced significant budget pressures over the period anticipated to total in excess of £18m. The government was still only providing one-year settlements and was predicating its 'spending power' increases to local government on the basis of the full use of Council Tax and Adult Social Care precept flexibility.

The report set out a strategy for balancing the budget position over the next three financial years. The gap to be addressed for 2024/25 is £2.845m,

with a three year gap of £7.957m. As Council Tax decisions will be made at a later date, the position for 2024/25 includes a memo item to highlight the increase in the gap up to £5.256m should no increase be applied. For every 1% Council Tax not applied, the Council loses circa £0.500m of income.

Members raised issues around the costs of energy for residential care homes and the impact on resident's charges and the fees paid by the Council. The costs of out of town care for children with highly complex needs was also raised with Members expressing their concern at the agencies levelling such charges. The Chair supported the views expressed and considered that more needed to be done at a national level on this issue.

There was discussion around the use of reserves to support the budget in the short term and the Director highlighted that specific reserves had been set aside for this purpose. In the future the Council would need to balance its budget without the use of reserves.

Members clarified the position in relation to a Council Tax rise and the Director stated that the recommendations did not tie-in a Council Tax rise but the report did set out clearly the advice in relation to that and the time table for decisions.

Decision

1. That the report and its contents be noted;
2. That the initial assessment of the forecast budget gap and proposed approach to address this gap in Section 8 of the report be noted. This included the earmarking of part of the Budget Support Fund to support the delivery of budget proposals;
3. That the risks and scenarios outlined in the report which may impact upon the financial position presented as part of future MTFS updates be noted; and
4. That the proposed budget timetable be noted.

7. Hartlepool Enterprise Centre *(Executive Director of Development, Neighbourhoods and Regulatory Services)*

Type of decision

Key Decision – General Exception Applies.

Purpose of report

To provide information requested by Council on 23rd March 2023 in relation to the proposed asset transfer of the Hartlepool Enterprise Centre (HEC) and to consider the options proposed in the report.

Issue(s) for consideration

The Executive Director of Development, Neighbourhoods and Regulatory Services reported on the background to the proposed disposal of the HEC building. Council at its meeting on 23 March 2023 (Minute No. 116 refers) requested that the disposal process be paused and investigated as there was a lack of clarity around the process and the method of the disposal.

The Executive Director outlined in the report the Community Asset Transfer Policy and also the process undertaken earlier in the year and the unsolicited offer to purchase the building. The Executive Director in his investigation acknowledged that the position in relation to the building and the means of its disposal could have been better communicated to Members.

In moving forward, the Executive Director set out two potential options for the Committee; recommence the existing sale process or re-examine the potential for Community Asset Transfer, though this would require some amendment to the policy.

Members commented that it was unreasonable that third sector bodies could access funding streams that the Council could not to secure the future of the HEC which was considered to be a valuable asset for the town. The Chair proposed that officers be directed to look at the potential for a Community Asset Transfer for the HEC as the preferred option so that Members could then examine the feedback from that marketing and balance that against the freehold offer for the site. This was supported by Members.

The following decision was agreed without dissent.

Decision

That the potential for a Community Asset Transfer for the Hartlepool Enterprise Centre be fully explored and that the feedback from that process be reported to the Committee.

8. Substance Misuse Needs Assessment and Draft Strategy (*Director of Public Health*)

Type of decision

Key Decision – General Exception Applies.

Purpose of report

To share the draft Substance Misuse Strategy, and to seek comments and approval from Finance and Policy Committee for final sign off of the strategy.

Issue(s) for consideration

The Director of Public Health presented the draft Substance Misuse Strategy to the Committee, a copy of which was appended to the report. The Director highlighted that the misuse of drugs and alcohol is one of the highest risk factors for ill-health across the UK with an estimate of 1 in 11 adults aged 16-59 having taken a drug in the last year, with 1.1 million adults having taken a class A drug. In the same year, it is estimated 358,000 hospital admissions were attributed to alcohol use, 6% higher than the previous year. Drug and alcohol use can lead to a number of physical and psychological conditions, such as liver disease, cardiovascular complications, high blood pressure, depression and anxiety.

The costs of alcohol and drug misuse to society are significant. Estimates show that the social and economic costs of alcohol-related harm amount to £21.5billion, while harm from illicit drug use costs £10.7billion. However, it is said £4 social return is made for every £1 spent on treatment and support services.

The draft strategy will inform the development of an action plan which would set out under each theme the detail of how we would deliver this priority area, who will deliver, timescales and be informed by indicators in order to measure success through an outcome framework. This would be shared with Finance and Policy Committee at a later date for approval.

Members discussed the financial support allocated by government to these services and the impact of 'best start' services for families and young children in preventing these and other issues. There was also concern expressed at some of the data around alcohol problems being experienced among older women.

The following decision was agreed without dissent.

Decision

That the Substance Misuse Strategy for Hartlepool be approved.

There was a short comfort break at this point in the meeting.

9. **Household Support Fund** *(Executive Director, Children and Joint Commissioning Services and Director of Finance, IT and Digital)*

Type of decision

Key decision tests (1) and (2) apply. Forward plan entry CJCS 134/23.

Purpose of report

To present to Finance and Policy Committee information on the delivery of phase three of the government's Household Support Fund (HSF) and proposals for delivery of a phase four scheme to support those in greatest need of assistance.

Issue(s) for consideration

The Executive Director, Children and Joint Commissioning Services reported that since September 2021 the Government had made available a 'Household Support Fund' targeting vulnerable households to help them with food and essentials as the country recovered from the pandemic. The report set out details of the groups previously supported and the numbers of residents that support had reached.

The latest HSF delivery scheme is for the period 01 April 2023 to 31 March 2024. Plans for delivery had to be submitted to government no later than the 17th May 2023 and an interim plan was submitted based on previous delivery processes and will be updated and shared with DWP once final agreement is confirmed with Members. The plan must be made publicly available including details of any application processes.

To date, the delivery methods chosen to deliver the previous HSF schemes have proven effective in reaching adults and children on a low income. Officers had met to explore the available options to maximise the impact of this grant to support vulnerable households in Hartlepool in accordance with the new grant conditions. It should be noted that the administration of such a large grant poses significant challenges to the capacity and workload of the local authority and the Third Party Organisations that it works in partnership with.

Details of the groups identified to be delivery partners and the allocation of funds to each was set out in detail in the report. Using this method of delivery this would mean that –

- 22% of the grant would be accessed via an application process where anyone struggling with the cost of living can apply;
- 73% would be allocated to households in receipt of benefits and on a low income;
- 5% of the grant would be used for administration and compliance of the fund including administration payments to voluntary and community sector organisations supporting the delivery of the grant.

The Executive Director also highlighted that should it become clear that individual strands of support was not being fully utilised, it is proposed to give delegation to the Director, Children and Joint Commissioning Services, in conjunction with the chair of Finance and Policy Committee, to amend funding pots so as to ensure full utilisation of grant within the time period.

Members welcomed the proposals and commented on the numbers of people that had been assisted through the previous funding. Members questioned if more local groups could be involved in the scheme. The Director stated that involvement had been through an open expression of interest, officers hadn't approached groups. There were new providers in this round of the scheme and some that worked across the whole town. A Member asked if there were details of the actual numbers of residents helped through the past programme and the executive Director stated these figures would be shared with Members as part of the annual update report.

Some Members expressed concern at some people becoming too reliant on the assistance provided through this support and asked if there was also financial management support being offered. The executive Director stated that there was a significant amount of local welfare support offered to provide people with 'a hand up, not a hand out'.

There was no dissent to the following decisions.

Decision

1. That the proposals outlined in the report and preferred implementation model be approved.
2. That the delegation to the Executive Director of Children and Joint Commissioning Services, in consultation with the chair of Finance and Policy Committee, to amend funding pots so as to ensure full utilisation of grant within the time period be approved.

10. Workforce Strategy (*Director of Legal, Governance and Human Resources*)

Type of decision

Non-key Decision.

Purpose of report

The purpose of this report is to request Finance and Policy Committee approval for the Workforce Strategy (2023-2026) as attached as Appendix 1 to the report.

Issue(s) for consideration

The Director of Legal, Governance and Human Resources reported that the Workforce Strategy had been developed by the Executive Leadership Team and the Senior Leadership Team with the vision to enable and innovate a workforce that has the community at its heart delivering the best of services. This will be driven by strong and effective leaders who demonstrate and promote the Council values to look after and develop the workforce making it a great place to work. The Strategy is a framework, and the priority and detail behind each of the aims will be developed and agreed with ELT over the next three years.

Members welcomed the strategy and suggested that it be shared with all Members of the Council.

There was no dissent to the following decision.

Decision

That the Workforce Strategy (2023-2026) as submitted, be approved.

11. Final Report – Child and Family Poverty in Hartlepool *(Audit and Governance Committee)***Type of decision**

Non-key Decision.

Purpose of report

To present the findings of the Audit and Governance Committee following completion of its investigation into Child and Family Poverty in Hartlepool.

Issue(s) for consideration

The Vice-Chair of Audit and Governance Committee presented to the Committee the final report of the Audit and Governance Committees investigation into Child and Family Poverty in Hartlepool. The Vice-Chair thanked the Audit and Governance Committee Members and the former Chair Rob Cook for their work in undertaking the investigation and he commended the report and its recommendation to the Committee.

The Vice-Chair of Audit and Governance Committee highlighted the recommendations around the establishment of a Poverty Truth Commission and the socio-economic duty.

The Vice-Chair of Audit and Governance Committee commended the report and also thanked the Statutory Scrutiny Manager and her team for all their work in preparing the final report. A Member commented that it was disappointing that all schools did not access all the free advice and support

that was available to them and particularly commended the work of SHINE North East.

The Chair supported the report and its recommendations and particularly the work to be undertaken on the socio-economic duty. The Chair also supported the use of all the support available to schools.

Decision

That Finance and Policy Committee approves the recommendations of the Audit and Governance Committee, following their investigation into Child and Family Poverty in Hartlepool, as detailed below:-

- 1) Exceptional services are provided in Hartlepool to mitigate the effects of poverty and these are the predominant focus of Hartlepool Council poverty activities. However, going forward, strategies and services need to move towards a more hands up/prevention/route out of poverty focused model lead to deliver more impactful change. As is being planned by the Trussell Trust Foodbank and The Joseph Rowntree Foundation.
- 2) The voluntary Socio Economic Duty be potentially adopted with the assistance of a working group that will look into:
 - What is required to facilitate the formal adopt the Socio Economic Duty;
 - What would be the benefits of its adoption;
 - How might it reduce poverty; and
 - What all of the above mean in practical and financial terms for the Council.
- 3) The establishment of a Hartlepool Poverty Truth Commission be progressed with the assistance from Thrive Teesside and the Poverty Truth Network. The purpose being to incorporate lived experience of socio economic disadvantage at all levels of decision making and policy development.
- 4) As and when the outcomes of ongoing national work in relation to best practice and service improvement becomes available, a further refresh of the new Child and Family Poverty Strategy be undertaken.
- 5) The implementation of the recommendations contained within the report to be monitored by the Audit and Governance Committee. Alongside an update on the poverty position in Hartlepool.
- 6) National targets have been removed for the reduction of poverty, however, national indicators have been created. It would be beneficial to set a series of Hartlepool specific indicators, against which outcomes (including the activities of the Poverty Truth Commission and adoption of the Socio Economic Duty) can be measured.

- 7) Ward based poverty data to be sent to Cllrs on an annual basis.
- 8) In terms of Schools, a poverty update is to be provided at a Head Teachers Briefing, as part of which schools:
 - Will be reminded of the value of the 'Poverty Proofing' exercise offered by Children North East;
 - Be encouraged to seek guidance and advice from external source where available, such as the SHINE Trust; and
 - Asked to promote the second hand uniforms scheme (Hartlepool Preloved Clothing) as a means of reducing costs for parents.
- 9) In terms of decision making:
 - Impact assessments are a part of the 'key' decision making process and development of strategies and Child and Family Poverty Impact Assessment and Equability and Diversity Impact Assessments are to be amalgamated to simplify the process; and
 - Where the process for monitoring the implementation of decisions identifies a potential 'new' or 'increased' poverty impact, the Impact Assessment should be revisited to gain a full understanding of the position and any action that may be required.
- 10) In terms of debt collection:
 - The impact of debt collection on those experiencing poverty needs to be evaluated with a view to supporting the provision of focused assistance and support; and
 - Where debt is poverty related, options for changes to procedures for debt collection be explored in terms of the provision of additional support / assistance.
- 11) In terms of advice and support:
 - Citizens Advice and other debt counselling services to be promoted to local groups and the VCS.
 - Awareness rolled out to partners/voluntary sectors on initiatives such as Baby Bank/Sensory spot.
- 12) The Council to seek from the Joseph Rowntree Foundation (JRF) an ongoing strategic commitment to work with Hartlepool Borough Council on Hartlepool's poverty issues.

12. Final Report – Final Report – Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions *(Audit and Governance Committee)*

Type of decision

Non-key Decision.

Purpose of report

To present the findings of the Audit and Governance Committee following completion of its investigation into Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions.

Issue(s) for consideration

The Vice-Chair of Audit and Governance Committee presented to the Committee the final report of the Audit and Governance Committees investigation into Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions. The Vice-Chair thanked the Audit and Governance Committee Members and the former Chair Rob Cook for their work in undertaking the investigation and he commended the report and its recommendation to the Committee.

The Vice-Chair of Audit and Governance Committee highlighted the role of Hartlepool HealthWatch is supporting the investigation and the representative of HealthWatch addressed the committee outlining some of the concerns around the Council's website raised by service users and how equality of access needed to be a fundamental part of every service across the Council.

Members questioned some of the statistics within the report specifically around those that had a positive experience in accessing Council services. The Statutory Scrutiny Manager commented that one of the clear positives that came out of the consultation was the positive view of Council staff. It was clear that they were helpful and always keen to ensure everybody had access to services.

A Member considered it was difficult to come to any conclusions when the numbers of public responding to the investigation was so low; in some instances response of form only 11 people were being used as the basis for recommendations. The Peer Group report highlighted that there was a need to make our consultation better. The Chair asked if Members were suggesting that despite the fact the report had been heavily researched with outside organisations that the public feedback was insufficient. The Managing Director questioned if it was the public feedback element that needed to be revisited and this was agreed by Members. Members also suggested that details of the engagement process also needed to be more clearly documented.

Decision

That consideration of the recommendations of the Audit and Governance Committees investigation into Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions be deferred to allow further public engagement to be undertaken and documented within the report.

13. Council Plan 2021-2024 – Progress Update *(Managing Director)***Type of decision**

For information.

Purpose of report

To provide an update to Finance and Policy Committee on the progress made on the delivery of the Council Plan 2021/22 – 2023/24. The report also included the 2022/23 Performance Indicator Report and the latest version of the Strategic Risk Register.

Issue(s) for consideration

The Managing Director submitted for the Committee's information the updated progress report on the implementation of the Council Plan, the Performance Indicator Report and the latest version of the Strategic Risk Register. The Managing Director commended the work of all staff across the Authority in delivering the aims of the Council Plan. The Council did face difficulties in several areas of recruiting and retaining staff and the aging workforce; issues that were national concerns for local government.

The Director reported that a full version of the Council Plan and the progress against it would be supplied to all Councillors.

Decision

1. That the progress made on the Council Plan 2021-2024 by May 2023 be noted;
2. That the Council Plan Performance Indicator report for 2022/23 as set out in appendix 1 to the report be noted;
3. That the updated Strategic Risk Register as set out in appendix 2 to the report be noted;
4. That the development of the Council Plan Annual Report 2022/23 be noted..

14. Any Other Items which the Chairman Considers are Urgent

None.

The Committee noted that the next meeting would be held on Monday 18 September, 2023 at 10.00 am in the Civic Centre, Hartlepool.

15. Local Government (Access to Information) (Variation Order) 2006

Under Section 100(A)(4) of the Local Government Act 1972, the press and public were excluded from the meeting for the following items of business on the grounds that they involved the likely disclosure of exempt information as defined in the paragraphs referred to below of Part 1 of Schedule 12A of the Local Government Act 1972 as amended by the Local Government (Access to Information) (Variation) Order 2006.

Minute 16 – Final Outturn 2022/23 – 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).

16. Final Outturn 2022/23 *(Director of Finance, IT and Digital)*

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).

Type of decision

Budget and Policy Framework.

Purpose of report

To provide details of the final outturn position for 2022/23 financial year.

Issue(s) for consideration

The Director of Finance, IT and Digital reported on the proposed write out of a debt in relation to residential accommodation charges. Members discussed the details of the case with officers outlining some of the detail behind the issue. The Chair requested that in light of Members concerns, a more detailed report be submitted to a future meeting to provide Members the detail they require prior to making a decision.

Decision

That the write off as detailed the confidential Appendix N be deferred and that a further detailed report be submitted to the Committee.

The meeting concluded at 12.10 pm.

H MARTIN

DIRECTOR OF LEGAL, GOVERNANCE AND HUMAN RESOURCES

PUBLICATION DATE: 12 JULY 2023

HEALTH AND WELLBEING BOARD

MINUTES AND DECISION RECORD

20 March 2023

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool

Present:

Representative of North East and North Cumbria Integrated Care Board –
Karen Hawkins (In the Chair)

Prescribed Members:

Elected Members, Hartlepool Borough Council – Councillors Allen, Buchan and Cook

Director of Public Health, Hartlepool Borough Council – Craig Blundred

Director of Children's and Joint Commissioning Services, Hartlepool Borough Council – Sally Robinson

Director of Adult and Community Based Services, Hartlepool Borough Council, Jill Harrison

Representatives of Healthwatch – Christopher Akers-Belcher and Margaret Wrenn

Other Members:

Managing Director, Hartlepool Borough Council – Denise McGuckin

Assistant Director of Joint Commissioning, Hartlepool Borough Council – Danielle Swainston

Representative of Tees, Esk and Wear Valley NHS Trust – Shaun Mayo (as substitute for Brent Kilmurray)

Representatives of Hartlepool Voluntary and Community Sector – Carl Jorgeson

Representative of GP Federation – Fiona Adamson

Observer – Statutory Scrutiny Representative, Hartlepool Borough Council – Councillor Hall

Officers: Zoe Craig, Environmental Health Manager (Environment Protection)
Dr Catherine Guy, Public Health Registrar
Dean Longstaff, Public Health Intelligence Analyst
Sylvia Pinkney, Assistant Director (Regulatory Services)
Abigail Reay, Advanced Public Health Practitioner
Claire Robinson, Public Health Principal
Joan Stevens, Statutory Scrutiny Manager
Amanda Whitaker, Democratic Services Team

32. Apologies for Absence

Councillor Moore, Leader of Council
Representatives of North East and North Cumbria Integrated Care Board -
– David Gallagher
Representative of Cleveland Police – Superintendent Martin Hopps
Representatives of Hartlepool Voluntary and Community Sector – Christine Fewster

The Board was advised that notification had been received from Dr Tim Butler that he wished to inform the Board that he will no longer be attending Board meetings. After consultation with his seniors in NHS England and the fact that almost all of the local commissioning of health services is now done by the Integrated Care Board, rather than NHS England, it was decided that it would be appropriate for him to stepdown from the Board.

Appreciation was expressed by Dr Butler for the opportunity to attend Board meetings which he had found informative and interesting over the last few years. Board members were wished continued success and improvement moving forward

33. Declarations of interest by Members

None

34. Minutes

The minutes of the meeting held on 28 November 2023 were confirmed.

The minutes of the meeting of the Children's Strategic Partnership held on 13 October 2022 were received.

35. HSSCP Annual Report (2021-22) *(Director of Children and Joint Commissioning Services)*

The report updated the Board on the work undertaken by the Hartlepool and Stockton-On-Tees Safeguarding Children Partnership during the year 2021-22. The report summarised the key successes and achievements of the Safeguarding Children Partnership throughout 2021-22. It provided updates on qualitative and quantitative data and information for the reporting period and outlined the specific areas being taken forward in the coming year.

Decision

The contents of the HSSCP Annual Report were noted.

36. Air Quality Strategy *(Assistant Director, Regulatory Services)*

The Board was advised that a draft Air Quality Strategy had been produced, a copy of which was appended to the report. The Strategy would fulfil DEFRA's requirements, enable the Council to respond to the increasing national recognition of the impact of air pollution on Public Health and raise local awareness of the importance of air pollution, emphasising the Council's role in maintaining and improving air quality. The proposed Strategy included a range of inter-departmental 'statements of intent' which had been developed by officers and would help ensure that air quality is an integral part of the Council's remit. If the strategy is approved, an action plan would be produced to deliver on these statements.

It was noted that the Council had committed to be a Net Zero Authority by 2030 and on 13th December 2021, Finance and Policy Committee had approved the production of a Net Zero and Climate Change Plan for the Council. This Air Quality Strategy would be integral to the Plan which is currently being developed

A Seaton ward councillor had requested that clarification be sought at the meeting regarding whether odours at Seaton Carew are detrimental to residents' health. The Assistant Director (Regulatory Services) advised that the issue was not part of the Air Quality Strategy but that the Department was aware of the issue and was working with the Environment Agency.

With regard to the proposed consultation process for the Strategy, the Assistant Director informed the Board that she was content to add any additional suggestions to the proposed list of consultees.

Decision

The Board noted the contents of the report and that the draft Air Quality Strategy will be going out for consultation.

37. Substance Misuse Needs Assessment and Strategy Development *(Director of Public Health)*

The report advised the Board that the Public Health team and partners had completed a substance misuse needs assessment, a copy of which was appended to the report. The needs assessment aimed to analyse the current need and identify any gaps in treatment and support services in Hartlepool by exploring previous and current data relating to drug and alcohol related harms. The key themes were set out in the report. The findings from the needs assessment and recommendations would inform a local substance misuse strategy. A presentation which supported the report reiterated the key themes and highlighted salient issues arising from the Needs Assessment

data. The Substance Misuse Strategy vision and priorities were being developed with partners with the priorities identified in the presentation as Prevention, Treatment, Wider Health Needs and Enforcement/Crime and Disorder. Priority areas identified would also feed into other Hartlepool and Tees wide strategic groups.

It was noted that a Substance Misuse Partnership group chaired by a member of the Public Health team would oversee the delivery of the action plan and report to the Board annually against progress. Christopher Akers-Belcher, Healthwatch representative, requested whether he could be included in Partnership Group.

Board Members debated issues arising from the report and presentation. The Director of Public Health responded to concerns expressed regarding treatment and support for alcohol issues. Clarification was sought regarding whether data included information for alcohol related hospital admissions. The Board was advised that the data was specific but wider data could be provided.

Decision

The Board considered the recommendations from the needs assessment and future strategy development and implications for the refresh of the Hartlepool Joint Health and Wellbeing Strategy.

The Board noted that the strategy and action plan will be brought to the Health and Wellbeing board annually to demonstrate action against priorities.

38. NHS Health Checks *(Director of Public Health)*

The Board was updated on the progress of the delivery of the NHS Health Check; a statutory requirement on the Local Authority which is funded through the public health grant. It is expected that Local Authorities across England will offer all eligible people a check within a five year cycle, currently 2018-2022. No region(s) are achieving or exceeding this threshold. Cumulative data for the last four years and six months showed that offers are below the 90% that would be expected at this point in the programme. All GP practices across Hartlepool are commissioned to deliver NHS Health Checks. The eligible population are identified for each GP practice, the contract monitoring sets quarterly and annual targets based on targets detailed in the report together with details of the funding structure. Following on from discussions across Tees in relation to NHS Health Checks and the current funding structure, there is ongoing work to look at targeted interventions to reduce inequalities and a change to the payment structure to support this.

A presentation was made to the Board which supported information set out in the report. The presentation provided further details in relation to Health Checks, data relating to targets including recent statistics and future goals.

Board members highlighted opportunities arising from Health Checks. A further report was requested relating to health checks for vulnerable groups.

Decision

The Board agreed the proposal outlined in the report.

The Board considered how NHS Health Checks can support the delivery of the Core25+ priorities, ICB strategy and NHS operating framework and future work to refresh the Joint Health and Wellbeing Strategy.

39. Health Protection Board – Terms of Reference *(Director of Public Health)*

The report outlined the revised arrangements for the local Health Protection Board. It was proposed that the revised Terms of Reference, appended to the report be adopted by the Board and that the membership reflects those people outlined. It was noted that additional members and contributors will be invited depending on the subject matter under discussion.

Decision

That the Board note the revised terms of reference for the Health Protection Board and approve its continuation.

40. Pharmaceutical Needs Assessment (PNA) 2022 - Supplementary Statements *(Director of Public Health)*

With reference to minute 7 of the meeting of the Board held on 4 July 2022, the Director of Public Health reported that a review of the process in relation to Supplementary Statements had been undertaken. One of the outcomes of the review had been that it had been agreed that a report be presented to the Board on a quarterly basis.

With regard to the previous quarter, it was reported that no statements had been issued since the last meeting of the Board. A notification had been received of the change of ownership of one pharmacy in Hartlepool, as detailed in the report. The Board was notified of this change, however, as it did not represent a change to the availability of pharmaceutical services in Hartlepool no supplementary statement was required.

Decision

The Board noted:-

- i) That no supplementary statements had been issued since the last meeting of the Board; and

- ii) The change of ownership referenced in the report.

41. Health and Wellbeing Strategy Refresh *(Director of Public Health)*

Further to the Board meeting held on 28 November 2022, the report sought agreement for the proposed stocktake and refresh of the current Health and Wellbeing Board Strategy as set out in the report.

A presentation which supported the report included a timeline for the 2025 Strategy development and a summary of the development of the Strategy in terms of current priorities and key future updates

Decision

The Board agreed the process and indicative timeline set out in the report.

42. Health Inequalities Funding Allocation across the North East and Cumbria *(Director of Public Health)*

The Board was advised that NHS North East and North Cumbria (NENC) Integrated Care Board (ICB) had been allocated £13.604m in 22/23 to support targeted reductions in health inequalities. The report provided a brief overview of the programmes approved by the ICB Executive and highlighted how this would benefit residents in Hartlepool.

A request was made by Christopher Akers-Belcher, Healthwatch representative, for a copy of the specification to assist understanding of what was being measured as part of the performance matrix.

Decision

The Board noted the agreed proposals in relation to the health inequalities funding across the North East and North Cumbria.

The Board noted the funding allocation for Hartlepool Borough Council and activity that will benefit residents.

43. Any Other Business

The Chair advised that she had not been notified, in advance of the meeting, of any other business. However, the Board was advised that a document had been presented immediately prior to the meeting which would be shared with Board members to ensure an informed response is collated.

Meeting concluded at 11.05 a.m.

CHAIR

FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: STRATEGIC FINANCIAL MANAGEMENT REPORT -
AS AT 30TH JUNE 2023

Report of: Director of Finance, IT and Digital

Decision Type: Budget and Policy Framework

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

2.1 The purpose of this report is to inform Members of:

- i) Forecast General Fund outturn for 2023/24;
- ii) Forecast Housing Revenue Account outturn for 2023/24;
- iii) Corporate Income Collection Performance; and
- iv) Capital Programme Monitoring 2023/24.

3. BACKGROUND AND FINANCIAL OUTLOOK

- 3.1 Previous reports to Finance and Policy Committee in July, highlighted an overspend on the 2022/23 budget position as well as significant pressures impacting on the MTFS position, including persistently high general inflation, energy inflation, higher than anticipated pay awards and increased demand and cost of Children's Social Care placements.
- 3.2 General inflationary pressures have started to ease slightly with CPI (Consumer Price Index – the governments key measure of inflation) falling to 7.9% at the end of June with a further reduction to 6.8% by the end of July. However, inflation is proving stickier than anticipated and private sector wage growth exceeded inflation during June, raising the prospect of upward pressure on inflation and a more sustained increase in the Bank of England interest rates.
- 3.3 The opening few months of the financial year has seen a flurry of warnings from Councils as to the sustainability of their financial position with the potential of S114 notices being issued or action equivalent to issuing such a notice, for example curtailing all non-essential spending, being progressed. Whilst such notices have been issued by a small number of councils in recent years these have tended to be down to "risky" borrowing and investments and not the general sustainability of core budgets which is now increasingly being seen.
- 3.4 There is a general theme of inflationary pressures and acute pressures in Adult Social Care and more specifically Children's Social Care that is leading to these concerns. Ultimately the delay in a Fair Funding review first mooted in 2016 is having a growing detrimental impact on the sustainability of local government finance. Whilst there is no certainty, the Council has a reasonable expectation of additional funding through this review, not least owing to our relative position on Business Rates.
- 3.5 The Council is similarly experiencing such pressures and the overall position facing the Council is outlined below.

4. 2023/24 FORECAST GENERAL FUND OUTTURN

- 4.1 The current forecast outturn position is summarised below and shows a forecast outturn of £3.935m. Should in year action not mitigate this position, and such an outturn materialise, this will have to be funded from the Budget Support Fund, which will significantly reduce one off resources available to support future budgets and reduce financial resilience. The position is detailed on Appendices A to E, with summary detail set out below.

	Q1 Forecast Outturn - Overspend/ (Underspend) £'000
Departmental Budgets	
Adult & Community Based Services	(300)
Children's & Joint Commissioning	3,390
Development, Neighbourhoods & Regulatory Services	855
Finance, IT and Digital	(50)
Legal, Governance and HR	40
Corporate	0
Total Forecast Budget Overspend	3,935

Adult and Community Based Services

- 4.2 The forecast net underspend at outturn of £0.300m for the whole department consists of a projected £0.595m underspend within Adult Social Care partly offset by a £0.295m projected overspend within Preventative & Community Based Services.
- 4.3 The forecast underspend within Adult Social Care is based on current client numbers and costs however it is still early in the year, with the winter period still to come, so these projections will be closely monitored and updated as the year progresses.
- 4.4 The forecast overspend within Preventative & Community Based Services mainly relates to a combination of historic income pressures across a number of areas (e.g. Leisure Centres, CECA, Town Hall Theatre and Borough Hall).
- 4.5 On 28 July 2023, the Department for Health & Social Care (DHSC) published the Adult Social Care Winter Letter 2023/24 which included an additional grant announcement of £600m Market Sustainability & Improvement Fund Workforce Fund. The Council's share of this fund is £0.762m. This is in addition to the previously announced, and budgeted, Market Sustainability and Improvement Fund allocation of £1.173m.
- 4.6 Both funds are 'ring-fenced' with specific conditions and reporting requirements linked to (i) increasing fee rates paid to adult social care providers in local areas; (ii) increasing adult social care workforce capacity and retention; (iii) reducing adult social care waiting times. The Council is working through its approach to utilisation of this grant.

Children and Joint Commissioning Services

- 4.7 The forecast outturn mainly relates to increases in the number of children in our care requiring external residential and independent fostering agency

placements. This reflects the increasing complexity of their needs and the significant fees being charged by the external care market. These increases also have associated adverse impacts on Section 17 and social work staffing budgets.

- 4.8 Budget pressures relating to children in our care have been included within the 2024/25 MTFS budget, albeit phased over a three year period. The phasing of this pressure will have to be revisited at the next iteration of the MTFS.
- 4.9 This area continues to be a risk for all councils owing to a range of external factors and the budget position will continue to be monitored closely during 2023/24 as demand continues to increase. As such, at this stage, there is a real risk that the budget position could deteriorate further.

Development, Neighbourhoods and Regulatory Services

- 4.10 The current forecast outturn for the department is an overspend of £0.855m. This is as a result of a number of factors including inflationary pressures on goods, materials and fuel and shortfalls in fee income.
- 4.11 In particular car parking income is showing an adverse variance of £0.245m. The Council is no longer receiving grant from TVCA for free car parking and the adverse variance is a result of a reduction in car parking income which reflects parking concessions and the post pandemic impact of reduced visitor numbers and hybrid working. The reduction in car park usage is a national trend. This pressure is not currently reflected in the MTFS.
- 4.12 There is an adverse variance in relation to planning income of £0.295m, this is a volatile area and the number of planning applications is down compared to previous years. This pressure is not currently reflected in the MTFS.
- 4.13 There is also a £0.200m adverse variance in the passenger transport service. This reflects a number of issues including an increase in demand led SEND referrals, which require out of town transport and inflationary pressures in relation to fuel and cost of external provision. This pressure is reflected in the MTFS.

Finance, IT and Digital Services

- 4.14 The forecast outturn is an underspend of £0.050m. This has arisen owing to favourable variances from staffing vacancies and staff not being at the top of their grade, which is offsetting a pressure on housing benefit subsidy recovery.

Legal, Governance and HR

- 4.15 An adverse forecast outturn of £0.040m with pressures from reduced income generation and the additional cost of elections, being offset by staffing vacancies and staff not being at the top of their grade.

Energy

- 4.16 As set out in previous reports, the Council adopted a two-fold strategy to address the unprecedented increase in energy prices; increasing the revenue budget for anticipated long term prices, coupled with use of an energy reserve for the shorter term spike.
- 4.17 The Council purchases its energy via the regional North East Purchasing Organisation (NEPO), with a forward purchasing strategy in place where deemed prudent. Based on energy purchased to date and market forecasts, energy prices have peaked in 2023/24 and at this stage the full energy reserve is anticipated to be used.

National Pay Award

- 4.18 A national pay offer for 2023/24 was made by employers on the 23 February 2023. The offer equated to £1,925 per employee regardless of grade up to spinal point 43, with 3.88% above this point. This was similar to the 2022/23 offer which was accepted. An offer of 3.5%, subsequently accepted, was made to Chief Officer grades. The pay award offer equates to a blended rate of approximately 6%. The Council had allowed for 5% resulting in an in-year shortfall for 2023/24 which can be met from temporary savings within Corporate budgets.
- 4.19 As at the time of writing, Unison, one of the larger public sector unions has confirmed it will not progress to strike action, whilst Unite have confirmed strike dates at a small number of Local Authorities where a strike mandate has been achieved. This does not include Hartlepool. The emerging position is being closely monitored.

Budget Savings Monitoring

- 4.20 Progress in the implementation of the £1.707m approved savings plans for 2023/24 has continued. The position is positive for this stage of the financial year given the demands and pressures services are experiencing. Directors continue to take the necessary action to mitigate any delays in implementation and, as such, the position is expected to improve as the year progresses.
- £1.149m (67%) of the savings have been fully realised to date.
 - £0.498m (29%) of savings where good progress is being made, with a good prospect that full savings will be achieved.
 - £0.060m (4%) is in respect of areas where delays and issues have been encountered, and at this stage it is deemed unlikely they will be delivered in year. For budget monitoring purposes these are included as a forecast outturn pressure.

- 4.21 As reported to Finance and Policy in July, there has been a delay in the progression of the sale or asset transfer of the Hartlepool Enterprise Centre. As such the saving of £0.023m is on hold pending resolution, and is categorized as red in the above monitoring.
- 4.22 With regard to the saving associated with Post-16 SEND transport, work is on-going to confirm the exceptional circumstances whereby the Council would be required to provide such transport and any additional costs associated with independent travel training. Pending clarification, the saving of £0.037m is at risk and categorized as red in the above monitoring.
- 4.23 It should be noted that the recent decisions on blue badge car parking charges and allotment charging are not included in the analysis at paragraph 4.20 given these are previous year and future year proposals respectively. The blue badge decision impact is included within the overall budget position for the year.

Dedicated School Grant

- 4.24 Up until 2022/23, the Council had successfully managed High Needs Block (HNB) costs within the available annual grant allocation and HNB reserves. This has been achieved despite a significant increase in demands on this service, including the impacts arising from COVID-19. Demands on the service in 2023/24 are forecast to exceed the grant allocation of £18.6m by £2.2m – a deficit of 11.8%.
- 4.25 The increase in cost is considered necessary to invest in Hartlepool provision and so avoid placement of pupils with SEND outside the town wherever possible. In time, this approach will reduce costs for independent and out of town provision and provide an improved outcome for Hartlepool children. Schools Forum have agreed to develop an action plan during 2023/24 to address this projected deficit in order to bring DSG HNB spend back in line with the budget over the next three years.
- 4.26 The current outturn projection is an overspend of £2.3m, owing to an increase in children being educated in independent or out of town provision.

5. PROPOSED ACTION TO ADDRESS FORECAST OVERSPEND

- 5.1 Members will recognise the position highlighted within section 4 is of significant concern. Whilst historically, outturn forecasts tend to improve as the year goes on, given the wider pressures and volatility of Children's Social Care in particular, there is a real risk that the outturn position could deteriorate even further.
- 5.2 The Council's financial position has been prudently managed over the years and to that end a Budget Support Fund (£4.946m) is in place to support the budget position. Other earmarked risk reserves are in place that could, as a very last resort, be called upon should the position require. As such the Council is not in the realms of a S114 notice. However, as has been seen at

other Local Authorities the position can deteriorate rapidly, and strong action is required now to reduce the overspend, protect available reserves to support the Medium Term Financial Strategy, and ensure the Council does not progress on the path to a S114 notice within the next 2 to 3 years, or beyond.

5.3 A plan has been developed to take actions to address the outturn position and this will be closely monitored. Agreed actions include;

- Seeking Directors to draw up budget actions to address the position;
- Monthly challenge clinics to monitor progress;
- Introduction of a Budget Management Scheme and training for all Budget Managers across the Council;
- Council wide messaging to all staff seeking support for spend curtailment;
- Acceleration of 2024/25 savings proposals where possible (appropriate approval will be sought first if required); and
- In-depth review of Council Reserves to be reported back in November.

5.4 Should these actions fail to have an impact, escalation and potential additional actions will need to be considered.

6. HOUSING REVENUE ACCOUNT (HRA)

6.1 There is currently a forecast favourable variance of £0.008m in relation to the HRA. The position is summarised below with details reported in Appendix F.

- Income is forecast to be higher than budgeted as a result of new Brenda Road units coming on-line sooner than originally anticipated;
- Borrowing costs are anticipated to be lower than originally budgeted owing to slippage on the capital programme. This has allowed an additional contribution to the Major Repairs Reserve to replenish reserves used to match fund the HUG de-carbonisation scheme. This scheme will improve the carbon footprint and energy efficiency of a number of HRA properties.
- There is also an anticipated adverse variance in relation to repairs as these are expected to increase in volume.

6.2 The HRA reserve is forecast to increase by £0.008m to £0.508m.

6.3 Details in relation to capital expenditure are included within Appendix G. The Council recently tendered for the design and construction of 48 residential units, also known as the Newmarket Housing Scheme. Unfortunately due to matters beyond the Council's control linked to the current financial crisis and changes to building regulations regarding thermal efficiency, it has meant that the scheme is unviable due to the increased costs of materials, equipment, resources, etc. resulting in a gap that now exists in the funding to enable the scheme to progress to the construction phase. Therefore Members are asked to note that the Council are not in a position to progress

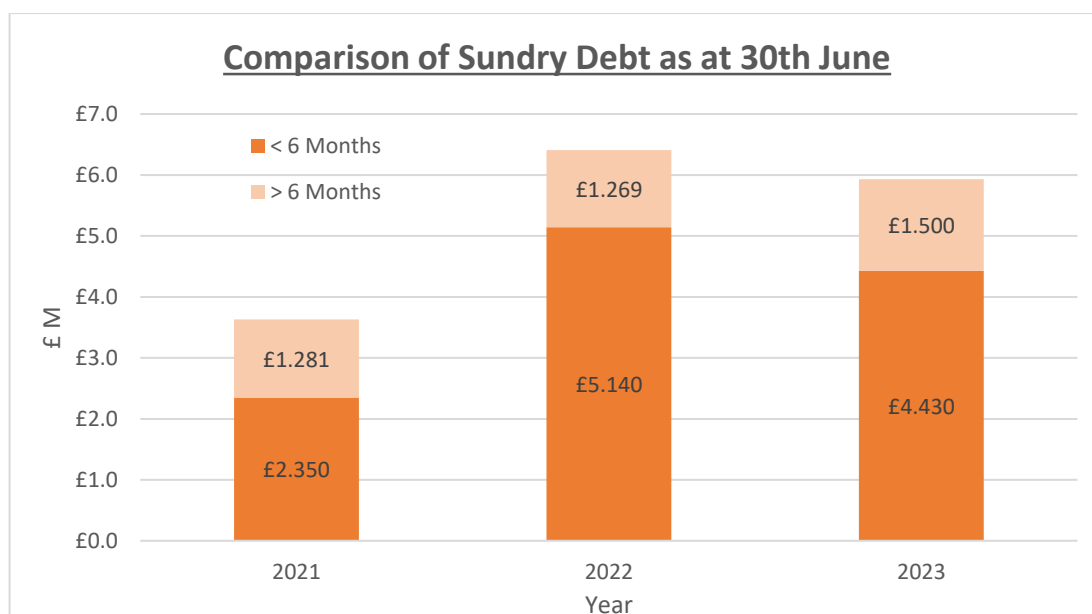
with this scheme in its current format and that officers will explore alternative options for this site and will bring a further report back to Committee once this piece of work is concluded.

- 6.4 Following the submission of an Expression of Interest to the Local Authority Housing Fund, round 2, the Department of Levelling Up, Housing and Communities (DLUHC) have offered the Council an allocation of £0.630m to support the Council to purchase 9 properties within the HRA. A deadline for acceptance of less than a week was given by DLUHC.
- 6.5 The primary purpose of the fund is to;
- Provide sustainable housing to those on Afghan resettlement schemes who currently reside or formerly resided in bridging accommodation; and
 - Ease wider homelessness pressures.
- 6.6 On average the grant available is expected to cover 70% of the acquisition and refurbishment costs with the balance met from S106 and previously agreed borrowing allocations. The costs of this borrowing can be met through the HRA account, with the scheme providing the minimum required surplus of £500 per annum per property, which was confirmed during formation of the Business Case.
- 6.7 Following this due diligence, the offer was accepted by the Managing Director under urgency powers in order to meet the DLUHC deadline. This scheme will be brought into the HRA capital programme at the next review.

7. INCOME COLLECTION AND COLLECTION FUND

Sundry Debts

- 7.1 The Council also collects significant Sundry Debts income for the payment of services provided by the Council. In total £10.03m of sundry debts were raised in the first three months of 2023/24. As at 1st August 2023, £7.99m (79.6%) of this amount had been collected.
- 7.2 Robust procedures for collecting the remaining outstanding debt are in place. The following graph shows the comparable positions at 30th June for the last three years for long term debt and current debt which has been outstanding for less than six months.



- 7.3 Debtors totalled £5.93m as at 30th June 2023, of which £4.43m (74.7%) relates to current debts (less than 6 months old). Included within current debts (less than 6 months old) is debt where the customer has been invoiced for the whole of 2023/24 but payment is to be received in instalments throughout the year.
- 7.4 Debts greater than 6 months old total £1.5m. 95.9% (£1.439m) of this amount is under recovery action and 4.1% (£0.061m) is now considered unrecoverable.
- 7.5 The Council's financial procedure rules provide that any debt due to the Council of £50,000 or more can only be written-off with the agreement of the Finance and Policy Committee. Robust procedures are followed in order to maximize recovery of all sums due, however, inevitably on occasion write off is required.
- 7.6 A debt in excess of £50,000 is set out at Appendix H for write off approval, following deferral at July Finance and Policy. **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).**

Council Tax

- 7.7 Collection figures for Council Tax are showing recovery from the pandemic particularly with regard to arrears collection. The in-year performance to the end of June was improved on the year before. Whilst this slipped back in July, the comparable figure last year was distorted by the £150 Energy Rebate scheme being offset against accounts. As at the 31st July 2023 the Council had collected 35.13% of the 2023/24 liability, compared to 35.73%

for the previous year. In addition over £1.30m of arrears has been collected to the end of July, over £0.30m more than the comparable stage last year reflecting the on-going catch up, from Covid-19 pandemic and the suspension of enforcement activity, which will continue for a number of years.

- 7.8 As Cost of Living issues continue, there may be an increase in the number of households eligible for LCTS, however that is yet to materialise. As at the end of July the caseload had decreased slightly from April, including for working age claimants. The claimant count was 13,036 in total of which 8,558 were working age. This position will be closely monitored against the Tax Base assumptions.
- 7.9 The collection fund in respect of Council Tax will continue to be closely monitored.

Business Rates

- 7.10 The government has continued to support businesses into 2023/24 in response to the Covid-19 pandemic with extended Retail, Hospitality and Leisure reliefs in place for the year. This relief results in a significant reduction in collectable business rates, but with full compensation by Government via a Section 31 grant.
- 7.11 At the 31st July 2023 the Council had collected 35.76% of the 2023/24 liability. Whilst this is slightly lower than the comparable stage last year, business rate collection tends to be volatile during the year, and is also impacted by changes to liability for businesses.
- 7.12 The position continues to be closely monitored for signs of financial stress in the business sector. To date we are not experiencing any more payment difficulties from businesses than in previous years. Where difficulties do arise, the team work with the business to tailor payments accordingly, whilst seeking to ensure full recovery of liability.

8. 2023/24 CAPITAL PROGRAMME MONITORING

- 8.1 Elsewhere on today's agenda is a report setting out the budget position on Highlight. This report includes a funding strategy that, in part, is a result of a root and branch review of the capital programme. This funding strategy is not reflected in the position below; the in year position at 1st review reflects the position as it stands to the 30th June 2023. The plan will be amended for 2nd review presented to Finance and Policy in November. Capital Expenditure for all Departments to the 30th June 2023 is summarised in the table below and is detailed in Appendices I to N.

Department	BUDGET	EXPENDITURE IN CURRENT YEAR				
	A	B	C	D	E	F
	2023/24 Budget £'000	2023/24 Actual as at 30/06/23 £'000	2023/24 Expenditure Remaining £'000	2023/24 Rephased into 2024/25 £'000	(B+C+D) 2023/24 Total Expenditure £'000	(E-A) 2023/24 Variance from Budget £'000
Major Regeneration Schemes	38,422	1,652	36,732	0	38,384	(38)
Adult & Community Based Services	4,510	522	2,964	450	3,936	(574)
Children's & Joint Commissioning Services	8,976	397	8,557	0	8,954	(22)
Development, Neighbourhoods & Regulatory Services	18,619	1,287	6,999	9,799	18,085	(534)
Finance , IT and Digital	130	0	0	0	0	(130)
Corporate	1,265	11	929	0	940	(325)
Total Capital Expenditure	71,922	3,869	56,181	10,249	70,299	(1,623)

- 8.2 Actual expenditure to 30th June 2023 was £3.869m, compared to a 2023/24 budget of £71.922m, £10.249m has been rephased to 2024/25 leaving £56.181m to be spent during the remainder of 2023/24. The rephased amount reflects the expected profile of expenditure to be incurred in future years and resources will be rephased accordingly.
- 8.3 The favourable variance from the budget of £1.623m reflects underspends on complete schemes. These schemes have been taken into account when framing the Highlight funding strategy elsewhere on today's agenda.
- 8.4 Whilst spend to date is low, there is a longer lead in time for capital schemes, with a number of variables that can determine progress. As such it is not unusual for expenditure to be low at this stage of the year.
- 8.5 A bid to the Libraries Improvement Fund for £0.200m has been successful. This funding, with a further £0.055m contribution from the Corporate Capital Pot, will be used to convert Seaton Library into a community hub. Improvement works include a new roof, windows, improved lighting, an accessible toilet and removal of the perimeter fence.
- 8.6 As with revenue the capital programme is anticipated to come under pressure from the current inflationary pressures. These will materialise at different stages in the year as individual projects progress, and will be evaluated prior to progression if required. An update will be provided to Finance and Policy Committee for individual schemes as or when required.

Section 106 Developers Contributions

- 8.7 The level of contributions for housing and non - housing service areas as at 30th June 2023 is included in Appendix O.

Capital Receipts

- 8.8 Achievement of capital receipts target has continued to be challenging. There remains £0.204m outstanding in relation to the previous target. Land sales in the current year are expected to address this shortfall and Members will be updated at future finance reviews.

9. CONCLUSION

- 9.1 The forecast outturn reflects the best estimate from budget monitoring in the first quarter of the financial year. The financial position outlined in the report is of serious concern, with a real risk of further deterioration.
- 9.2 The position will be closely monitored, in conjunction with actions agreed as part of an action plan to address the position and an update will be provided at second review.
- 9.3 In addition to the in year position, the position highlights the need to review the MTFs, bring forward pressures and potentially include additional pressures into the budget position. This will further tighten the position with the additional impact of less reserves being available should the in year position not be addressed.

10. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	No relevant issues.
FINANCIAL CONSIDERATIONS	The financial implications are fully set out in the main body of the report.
LEGAL CONSIDERATIONS	No relevant issues.
CHILD AND FAMILY POVERTY	No relevant issues.
EQUALITY AND DIVERSITY CONSIDERATIONS	No relevant issues.
STAFF CONSIDERATIONS	No relevant issues.
ASSET MANAGEMENT CONSIDERATIONS	No relevant issues.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No relevant issues.

CONSULTATION	No consultation required.
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11. RECOMMENDATIONS

11.1 It is recommended that Members:

- i) Note the forecast revenue outturn position and accompanying financial performance for the quarter, including decisions undertaken for urgency;
- ii) Recognise the seriousness of the financial position and that actions are being progressed to mitigate this as far as possible as set out in Section 5;
- iii) Note the Housing Revenue Account position detailed within Section 6 of the report;
- iv) Note the forecast capital outturn position detailed within Section 8 of the report, including any budget realignments; and
- v) Approve the write off as detailed in Section 7 of the report and confidential Appendix H.

12. REASONS FOR RECOMMENDATIONS

12.1 To keep Finance and Policy Committee updated on the Council's 2023/24 financial position.

13. BACKGROUND PAPERS

13.1 None

14. CONTACT OFFICERS

James Magog
 Director of Finance, IT and Digital
 Email: james.magog@hartlepool.gov.uk
 Telephone: 01429 523093

Sign Off:-

Managing Director	Date: 29/08/2023
Director of Finance, IT and Digital	Date: 29/08/2023
Director of Legal, Governance and HR	Date: 07/09/2023

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2023/24 as at June 30th 2023

Approved 2023/24 Budget £'000	Description of Service Area	Actual Adverse/ (Favourable) £'000	Director's Explanation of Variance
58	Adult Education	0	
22	Archaeology	0	
3	Carers & Assistive Technology	0	
(193)	Coast, Countryside & Heritage	(10)	Minor variances.
2,232	Commissioning - Adults	(40)	Forecast underspend mainly relates to housing related support contracts.
1,232	Community Hubs	45	Forecast overspend mainly relates to reduced income from room hire across all sites, including the CECA.
621	Cultural Services	155	Forecast overspend mainly relates to historic income pressures across the Town Hall and Borough Hall.
(111)	Departmental Running Costs	(15)	Minor variances.
555	Direct Care & Support Team	(5)	Minor variances.
0	Employment & Skills	0	
79	General Allotments	0	
644	LD & Transition Social Work	(40)	Forecast underspend relates to pay incremental drift.
2,257	Locality & Safeguarding Team	10	Minor variances.
1,082	Mental Health Services	0	
1,466	OT & Disability Equipment	5	Minor variances.
1,909	Packages of Care - Mental Health	(220)	
13,214	Packages of Care - Older People	485	Packages of Care forecast outturns are based on current projections however it is still early in the year with the winter period still to come so these projections will be closely monitored and updated as the year progresses.
12,060	Packages of Care - Working Age Adults	(700)	
600	Sports, Leisure & Recreation Facilities	105	Forecast overspend mainly relates to income and other cost pressures across the leisure centres, Summerhill and Carlton.
1,261	Working Age Adult Day Services	(75)	Forecast underspend mainly relates to reduced transport and supplies and services costs.
38,991	Adult & Community Based Services Total	(300)	

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2023/24 as at June 30th 2023

Approved 2023/24 Budget £'000	Description of Service Area	Actual Adverse/ (Favourable) £'000	Director's Explanation of Variance
146	Access to Education	0	
157	Central Support Services	0	
2,888	Children & Families	600	Forecast overspend relates to increases in the number of children subject to Child Arrangement Orders, Special Guardianship Allowances or receiving a Direct Payment.
16,272	Children in our Care	3,414	Forecast overspend mainly relates to an increase in the number of children in our care requiring external residential and independent fostering agency placements. This reflects the increasing complexity of their needs and the significant fees being charged by the external care market.
(63)	Early Intervention	(300)	Forecast favourable variance mainly relates to staff savings from vacant posts and incremental drift.
364	Housing, Hardship & Welfare	(310)	Forecast favourable variance mainly relates to the receipt of a number of 'one-off' grants.
487	Other School Related Expenditure	0	
10	Play & Care	40	Forecast overspend mainly relates to historic income pressures.
426	Raising Educational Achievement	(26)	Favourable variance on staffing - part year vacancies.
5,018	Safeguarding Children	140	Forecast overspend mainly relates to increased temporary staffing costs and Section 17 related spend on supporting children and families.
365	Special Needs Services	(19)	Salary savings as staff not at top of grade.
255	Standards, Engagement & Development	(50)	Favourable variance mainly relates to increased training/work placement income.
1,627	Strategic Commissioning	(35)	Forecast favourable variance mainly relates to underspends across a range of non-pay budgets and receipt of additional grant funding.
468	Strategic Management	0	
289	Youth Justice Service	0	
341	Youth Service	(64)	Savings from staff vacancies (seeking to appoint).
29,050	Children's and Joint Commissioning Services	3,390	
Public Health Grant			
4,080	Children's Services	(5)	Minor variances.
2,611	Substance Misuse Services	(55)	Forecast underspend mainly relates to staff vacancies and incremental drift.
1,642	General Public Health Support Services	(65)	Forecast underspend mainly relates to staff vacancies and incremental drift.
634	Sexual Health Services	65	Forecast overspend relates to planned additional expenditure relating to the Sexual Health contract which was originally to be funded from the Public Health reserve but will now be funded from the in-year outturn position.
308	Physical Activity	0	
173	Mental Health	0	
115	Health Checks	5	Minor variances.
102	Obesity	0	
(9,665)	Public Health Grant	0	
0	Contribution to Ring-Fenced Public Health	55	The underspend is transferred to the ring-fenced Public Health grant reserve.
0	Public Health Grant	0	
29,050	Children's and Joint Commissioning Services Total (inc Public Health Grant)	3,390	

	Dedicated Schools Grant	Actual Adverse/ (Favourable)	
0	Early Years Block	(60)	Lower attendance for 3-4 year old settings compared to census funding is anticipated.
2,147	High Needs Block	2,300	In-year funding adjustment for increased number of Hartlepool pupils educated outside of the town.
0	Schools Block	0	
2,147	TOTAL Dedicated Schools Grant	2,240	

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2023/24 as at June 30th 2023

Approved 2023/24 Budget £'000	Description of Service Area	Actual Adverse/ (Favourable) £'000	Director's Explanation of Variance
(95)	Building Team Design	0	
(922)	Car Parking & Enforcement	245	The Council is no longer receiving grant from TVCA for free car parking and the adverse variance is a result of a reduction in car parking income which reflects parking concessions and the residual impact of the pandemic, which has not only affected visitor numbers but also many workers who would have used the car parks but now work from home for part of the week. The reduction in car park usage is a national trend.
1,019	Community Safety & Engagement	(60)	The forecast favourable variance is mainly owing to reduced operating expenditure as a result of vacant posts in this area.
146	Construction Team	80	Reflects inflationary pressures, however new rates have been implemented to mitigate these costs and it is hoped that this variance will reduce later in the year. If the pay award exceeds the budgeted increase, this will result in an additional adverse variance.
401	Economic Growth	0	
327	Engineering Services (incl Coastal Protection and Contaminated Land)	0	
3,024	Environmental Services	0	
1,215	Facilities Management	145	The adverse variance reflects a shortfall in income in relation to building cleaning as SLAs had to be put in place prior to the pay award being confirmed and hence don't currently reflect the full cost of delivering the service. Action has been taken to reduce staffing costs to mitigate the variance however an adverse variance is still anticipated.
210	Health & Safety	0	
2,739	Highways	0	
1,879	Passenger Transport	200	The adverse variance reflects a number of issues including an increase in SEND referrals, which require out of town transport, inflationary pressures in relation to fuel and the cost of external provision which typically has increased by 10%. There is currently a national shortage of qualified drivers owing to new licence requirements, which has meant external operators are having to pay more to attract and retain staff. There are also cost pressures as a result of increased Fleet recharges following acquisition of new vehicles, which have increased in price.
25	Procurement & Reprographics	0	
949	Public Protection	90	Reflects shortfall in license fee income. A corporate reserve was established in 2021/22 to address income pressures.
152	Road Safety	0	
972	Street Lighting	165	Adverse variance reflects increased costs in materials and labour. Action will be taken to mitigate this issue and it is hoped that this variance will reduce later in the year.
2,449	Sustainable Transport	(240)	Reflects favourable contract negotiations in relation to concessionary fares.
(94)	Vehicle Fleet	(140)	Savings on borrowing costs for vehicles owing to delays in acquiring new vehicles. At this stage maintenance costs are within budget but there is a high risk that these could increase over the year ahead and therefore this position will need to be closely monitored.
5,833	Waste & Environmental Services	0	
285	Planning & Development	295	Reflects shortfall in planning income, the number of planning applications is down compared to previous years.
(105)	Strategic Asset Management	75	Reflects shortfall in fee income in relation to capital receipts.
99	Strategic Development & Sustainability	0	
242	Strategic Management & Admin	0	
20,750	Development, Neighbourhoods & Regulatory Services Total	855	

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2023/24 as at June 30th 2023

Approved 2023/24 Budget £'000	Description of Service Area	Actual Adverse/ (Favourable) £'000	Director's Explanation of Variance
164	Benefits	(35)	Favourable variance owing to vacant posts and posts not being at the top of the grade.
(1,027)	Central Administration Recharges	0	
176	Communications and Marketing *	55	Adverse variance owing to additional costs for Hartbeat and the advertising contract.
1,194	Corporate Finance	(140)	Favourable variance owing to vacant posts, posts not being at the top of the grade.
267	Corporate Strategy & Public Consultation *	0	
(143)	Housing Benefits Subsidy	200	The grant generates £24m in subsidy, but the grant is reducing along with the current transfer rate of claimants across to Universal Credit. The anticipated variance will be reviewed during the Mid Year Review, which will be submitted to DWP.
1,080	Customer and Support Services	(40)	Favourable variance owing to vacant posts and posts not being at the top of the grade.
250	Internal Audit	0	
(138)	Registration Services	20	The adverse variance is owing to a reduction in income generation on both birth and death registration resulting from services being transferred to North Tees Hospital.
1,061	Revenues	(25)	Favourable variance owing to vacant posts and posts not being at the top of the grade.
(678)	Revenue & Benefits Central	(15)	Favourable variance owing to vacant posts and posts not being at the top of the grade.
612	Shared Services	(55)	Favourable variance owing to vacant posts and posts not being at the top of the grade.
153	Public Consultation & Diversity *	0	
252	Corporate Management Running Expenses	(15)	The favourable variance is owing to savings on the Corporate subscriptions budget.
3,223	Finance, IT & Digital Total	(50)	

* These budgets report to the Managing Director via the Assistant Director for Development and Growth

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2023/24 as at June 30th 2023

Approved 2023/24 Budget £'000	Description of Service Area	Actual Adverse/ (Favourable) £'000	Director's Explanation of Variance
43	Civic Attendants	5	Minor variances.
168	Democratic	0	
467	Human Resources	0	
31	Trade Union	(10)	The favourable variance is owing to less staff time recharged against Union duties.
681	Legal Services	55	The adverse variance is owing to additional supplies and services costs and reduced income generation.
165	Municipal Elections and Registration of Electors	20	The adverse variance is owing to additional cost of elections.
1	Other Office Services	15	The adverse variance is owing to a reduction in income generated from Local Land Searches.
101	Scrutiny	0	
135	Support to Members	0	
2	Training & Equality	0	
190	Managing Director's Office	(45)	Favourable variance owing to vacant posts and posts not being at the top of the grade.
1,984	Legal, Governance and HR Total	40	

2022/23 OUTTURN £'000		2023/24 BUDGET £'000	2023/24 FORECAST £'000	VARIANCE £'000	COMMENTS
	Income				
(1,399)	Dwelling Rents	(1,524)	(1,577)	(53)	Additional income from new Brenda Road units due to the scheme coming on-line sooner than originally budgeted. There is also a reduction in loss of income from void properties.
(28)	Non-dwelling Rents - Other Income	(31)	(25)	6	
(5)	Charges for services and facilities	(3)	(2)	1	
(1,432)	Income sub total	(1,558)	(1,604)	(46)	
	Expenditure				
202	Repairs and maintenance	265	315	50	Adverse variance reflects expected increase in volume of repairs.
397	Supervision and management	411	416	5	
27	Rents, rates, taxes and other charges	22	22	0	
45	Provision for bad or doubtful debts	20	20	0	
406	Depreciation (Major Repairs Allowance)	370	470	100	Adverse variance reflects additional contribution to match fund the HUG decarbonisation scheme.
3	Discretionary Housing Payments	2	3	1	
10	Debt Management costs	12	12	0	
337	Net Interest payable	456	338	(118)	Favourable variance reflects revised profile of capital schemes and additional borrowing costs now profiled into future years.
1,427	Expenditure sub total	1,558	1,596	38	
(5)	HRA (Surplus) / Deficit for the year	0	(8)	(8)	
	Movement on the HRA Reserve				
(495)	HRA Reserve Opening Balance		(500)		
(5)	(Surplus)/Deficit for the year		(8)		
(500)	HRA Reserve Closing Balance		(508)		

HRA CAPITAL MONITORING REPORT PERIOD ENDING 30th June 2023

Project Code	Scheme Title	A	B	C	D	E	F	G	Type of Financing	2023/24 COMMENTS
		Full Budget £'000	2023/24 Budget £'000	2023/24 Actual as at 30/06/23 £'000	2023/24 Expenditure Remaining £'000	Expenditure Rephased into 2024/25 £'000	(C+D+E) 2023/24 Total Expenditure £'000	(F-B) 2023/24 Variance from Budget £'000		
7182	Empty Homes - Phase 3	1,064	1,064	0	0	1,064	1,064	0	UDPB	Existing funding approval pending business cases.
S106	Affordable Housing	1,153	1,153	0	0	1,153	1,153	0	GRANT	S106 Developer Contributions - see separate appendix for further details and schemes 7450 and 7534 below. Affordable housing developer contributions will be reviewed in due course.
7450	Hill View Development	2,239	58	0	58	0	58	0	S106	Final account expected September 2023, funded from S106 contributions
7534	Newmarket Housing Scheme (BHF)	8,472	4,580	0	4,580	0	4,580	0	MIX	This scheme is unable to progress as set out in paragraph 6.3 of the report. It will be removed from the capital programme at second review. S106 funding of £100,746 is included, however this can be redirected where necessary.
7620	Brenda Road - Phase 1	2,094	898	771	127	0	898	0	MIX	Expect scheme to complete by the end of 2023/24.
8106	New Build	692	692	0	0	692	692	0	UDPB	Existing funding approval pending business cases.
NEW	HUG Decarbonisation	442	442	0	177	265	442	0	MIX	Scheme expected to commence Quarter 2.
COUNCIL HOUSING CAPITAL SCHEMES - TOTAL		16,156	8,887	771	4,942	3,174	8,887	0		

MAJOR REGENERATION SCHEMES
5.1 APPENDIX I
CAPITAL MONITORING REPORT PERIOD ENDING June 30th 2023

Project Code	Scheme Title	A Full Budget £'000	B 2023/24 Budget £'000	C 2023/24 Actual as at 30/06/23 £'000	D 2023/24 Expenditure Remaining £'000	E Expenditure Rephased into 2024/25 £'000	F (C+D+E) Total Expenditure £'000	G (F-B) Variance from Budget £'000	Type of Financing	2023/24 COMMENTS
7447	CIP Cap-Headland Amphitheatre	784	171	0	0	0	0	(171)	MIX	Scheme complete and awaiting final account to be confirmed.
8958	A19/ Elwick Road/ North Lane junction and Elwick Road/Hartlepool Western Link Project	18,506	694	89	605	0	694	0	MIX	
7550	CIP - Waterfront Leisure Centre (Highlight)	21,394	7,610	7	7,603	0	7,610	0	MIX	
7552	CIP - Waterfront Public Realm	2,000	240	0	240	0	240	0	GRANT	
7551	CIP - Waterfront Infrastructure	2,256	300	82	218	0	300	0	MIX	
9101	CIP - Borough Hall Improvement	3,000	200	0	200	0	200	0	MIX	
9159	CIP - Wingfield Castle works	4,000	781	51	730	0	781	0	MIX	
9161	CIP - NMRN & Museum of Hartlepool	8,500	5,100	0	5,100	0	5,100	0	MIX	
7536	CIP - SEMH Free School Access Road	850	813	380	433	0	813	0	MIX	
9130	CIP - Business Park Investment	760	751	1	750	0	751	0	MIX	
TBC	CIP - Waterfront Public Art	780	0	0	0	0	0	0	MIX	Scheme reliant on securing external funding.
TBC	CIP - Mill House Demolition	500	0	0	0	0	0	0	MIX	Proposed to be removed from capital programme as part of Highlight report.
TBC	CIP - Business Loans Fund	500	0	0	0	0	0	0	MIX	Pending Mandate.
TBC	CIP - Shades	4,259	0	0	0	0	0	0	MIX	Pending Mandate.
TBC	CIP - Bowling Club Refurbishment	600	0	0	0	0	0	0	MIX	Pending Mandate.
TBC	CIP - Brierton Sports Complex	700	0	0	0	0	0	0	MIX	Pending Mandate.
TBC	CIP - Headland Sports Hall	200	0	0	0	0	0	0	MIX	Pending Mandate.
TBC	CIP - NIP Phase 2	500	0	0	0	0	0	0	MIX	Proposed to be removed from capital programme as part of Highlight report.
TBC	CIP - Car Parking Facilities Match Funding	100	0	0	0	0	0	0	MIX	Pending Mandate.
9165	Towns Fund - Middleton Grange	13,860	8,794	8	8,786	0	8,794	0	GRANT	
9231	Towns Fund - Waterfront Connectivity	6,200	2,061	155	1,906	0	2,061	0	GRANT	
7715	Towns Fund - Wesley Chapel	1,400	1,312	1	1,311	0	1,312	0	GRANT	
9234	Towns Fund - Health and Social Care Academy	1,250	1,164	0	1,164	0	1,164	0	GRANT	
9235	Towns Fund - Civil Academy	2,250	0	0	0	0	0	0	GRANT	
9247	Levelling Up Production Village	16,431	8,431	878	7,686	0	8,564	133	GRANT	The variance reflects the proposal to transfer the £133k underspend from the completed 15 Church Street Renovation budget.
Major Regeneration Schemes		111,580	38,422	1,652	36,732	0	38,384	(38)		

Key			
RCCO	Revenue Contribution towards Capital	GRANT	Grant Funded
MIX	Combination of Funding Types	CAP REC	Capital Receipt
UCPB	Unsupported Corporate Prudential Borrowing	UDPB	Unsupported Departmental Prudential Borrowing
SCE	Supported Capital Expenditure (Revenue)	CORP	Corporate Resources

CAPITAL MONITORING REPORT PERIOD ENDING 30th June 2023

Project Code	Scheme Title	A Full Budget £'000	B 2023/24 Budget £'000	C 2023/24 Actual as at 30/06/23 £'000	D 2023/24 Expenditure Remaining £'000	E Expenditure Rephased into 2024/25 £'000	F (C+D+E) Total Expenditure £'000	G (F-B) Variance from Budget £'000	Type of Financing	2023/24 COMMENTS
Adult & Community Based Services										
7212	Capital Grants to Care Homes	149	131	0	25	0	25	(106)	UCPB	
7234	Chronically Sick and Disabled Persons Adaptations	182	144	0	0	0	0	(144)	MIX	
7218	Disabled Facilities Grant	1,647	1,560	203	1,335	0	1,538	(22)	GRANT	
7483	Grayfields	108	108	0	0	0	0	(108)	MIX	
7522	Stranton Cemetery Flood Alleviation	600	93	0	93	0	93	0	MIX	
7576	Seascapes - Seaton High & Lowlight	128	118	98	20	0	118	0	MIX	
7711	Carlton Adventure Centre	434	434	0	434	0	434	0	UDPB	Details of scheme to be finalised - Report scheduled for A&CBS Committee September 2023.
7716	Seaton Library refurbishment	255	255	0	255	0	255	0	MIX	
7811	Summerhill Cycle Hub	514	18	0	18	0	18	0	GRANT	
7831	Community Hub South - Internal Alterations	88	11	0	11	0	11	0	GRANT	
8108	Centre for Independent Living	146	146	0	0	50	50	(96)	GRANT	Funding retained as 'Sinking Fund' to maintain building in future years.
8393	Stranton Cemetery Cremators	255	16	0	16	0	16	0	MIX	
9212	Relocate Cemetery Office	90	53	0	53	0	53	0	CAP REC	
8088	Community Hub South - Kitchen Replacement	41	36	0	36	0	36	0	MIX	
8088	Community Hub Central - Internal Alterations	61	27	0	27	0	27	0	RCCO	Work to upstairs classroom.
8534	Church Street Townscape Heritage	264	243	203	40	0	243	0	RCCO	Work continuing on buildings, grant extended to December 2023.
8103	Swimming Scheme	35	35	0	0	0	0	(35)	RCCO	
8408	Mill House - Equipment Purchase	3	3	0	0	0	0	(3)	MIX	
8409	Sport & Youth Improvements	12	12	0	0	0	0	(12)	CAP REC	
8634	Playing Pitches - Football Foundation	5	5	0	0	0	0	(5)	RCCO	
8689	Brierton Sports Fields	1	1	0	0	0	0	(1)	MIX	
8896	Brierton Tennis Courts	30	30	0	0	0	0	(30)	RCCO	
9232	Playground Equipment - Levelling Up Parks Fund	92	71	5	66	0	71	0	RCCO	
9311	Changing Places - Community Hub Central	75	75	0	75	0	75	0	MIX	
9310	Changing Places - Summerhill	62	62	0	62	0	62	0	MIX	
NEW	Changing Places - Headland	25	25	0	25	0	25	0	MIX	Scheme details currently being reviewed.
7543	Waverley Allotments (Car Park)	21	12	0	0	0	0	(12)	CAP REC	Scheme complete.
Allot	General Allotment Schemes	193	173	13	160	0	173	0	UDPB	
8584	Waverley Allotments - Adult Education Scheme	50	50	0	50	0	50	0	GRANT	
CR	Stranton Chapel Refurbishment	563	563	0	163	400	563	0	MIX	
Total Adult & Community Based Services		6,129	4,510	522	2,964	450	3,936	(574)		

Key			
RCCO	Revenue Contribution towards Capital	GRANT	Grant Funded
MIX	Combination of Funding Types	CAP REC	Capital Receipt
UCPB	Unsupported Corporate Prudential Borrowing	UDPB	Unsupported Departmental Prudential Borrowing
SCE	Supported Capital Expenditure (Revenue)	CORP	Corporate Resources

CAPITAL MONITORING REPORT PERIOD ENDING June 30th 2023

Project Code	Scheme Title	A Full Budget £'000	B 2023/24 Budget £'000	C 2023/24 Actual as at 30/06/23 £'000	D 2023/24 Expenditure Remaining £'000	E Expenditure Rephased into 2024/25 £'000	F (C+D+E) Total Expenditure £'000	G (F-B) Variance from Budget £'000	Type of Financing	2023/24 COMMENTS
Children's and Joint Commissioning Services										
7384	Devolved Schools Capital	247	209	12	197	0	209	0	GRANT	Includes £94k 23/24 allocation.
9238	Energy Efficiency Capital Funding	195	188	6	182	0	188	0	GRANT	22/23 additional capital funding carried forward for use in 23/24.
7586	Purchase of Computer Equipment - CLC Standards Fund	37	37	0	37	0	37	0	RCCO	
7355	CECA IT Infrastructure and Technology	42	24	0	24	0	24	0	GRANT	
7355	CECA TVCA Grant Unallocated	31	31	0	31	0	31	0	GRANT	
7142	Schools General - Fire Safety Modifications (Conditions)	53	53	0	53	0	53	0	GRANT	Schemes to be identified.
7142	Schools General - Fire Safety Modifications (Conditions) 23/24	464	418	0	418	0	418	0	GRANT	Schemes to be identified.
7142	Kingsley - Fire Safety Modifications	319	178	0	178	0	178	0	GRANT	Scheme on hold.
7142	Throston - Fire Safety Modifications	200	131	2	129	0	131	0	GRANT	Scheme on going.
9027	English Martyrs - New Build	155	155	0	155	0	155	0	GRANT	
9028	High Tunstall New Build	161	161	0	161	0	161	0	GRANT	
7478	High Tunstall Grass Pitch	15	15	0	15	0	15	0	UPDB	
8906	Brierton Campus Windows	18	18	1	0	0	1	(17)	RCCO	Scheme complete.
7521	Two Year Old FNE Capacity Funding	23	23	0	23	0	23	0	GRANT	
7770	St Helens Primary School Main Entrance Access	41	41	35	6	0	41	0	GRANT	Scheme on going.
9148	Springwell Special School Increase Capacity	424	76	0	76	0	76	0	GRANT	Scheme on going.
7661	Catcote Secondary Special School Alternative Provision 6th Form	306	270	3	267	0	270	0	GRANT	Scheme on going.
9295	Clavering Primary School Refurbish Boys WC	47	47	0	47	0	47	0	GRANT	Scheme approved. Awaiting start date.
	Clavering Primary School Roofing Works	13	13	0	13	0	13	0	GRANT	Works to commence October 23 (Half term).
9295	Fens Primary School Refurbish Boys WC	29	29	0	29	0	29	0	GRANT	Scheme approved. Awaiting start date.
9311	Fens Primary School Rewire Ph4	99	99	0	99	0	99	0	GRANT	Scheme awaiting pricing.
9313	Golden Flatts Primary School Demolish Caretakers Bungalow	32	32	0	32	0	32	0	GRANT	Scheme approved. Awaiting start date.
9315	Horizons School Replace Roof Lights	5	5	0	5	0	5	0	GRANT	Scheme approved. Awaiting start date.
9314	Horizons School Rewire	76	76	1	75	0	76	0	GRANT	Scheme approved. Awaiting start date.
9295	Kingsley Primary School Refurbish Boys WC	26	26	0	26	0	26	0	GRANT	Scheme approved. Awaiting start date.
9292	Kingsley Primary School Lighting Replacement	32	32	0	32	0	32	0	GRANT	Works to commence October 23 (Half term).
7725	Kingsley Primary School Heating, DHW Boiler Plant Renewal	115	115	0	115	0	115	0	GRANT	Scheme awaiting pricing.
	Lynnfield Primary School Roofing Works	50	50	0	50	0	50	0	GRANT	Tender package in process.
9310	Lynnfield Primary School Refurbish Boundary Wall	27	27	0	27	0	27	0	GRANT	Scheme approved. Awaiting start date.
9315	Lynnfield Primary School Heating Renewal	44	44	0	44	0	44	0	GRANT	Scheme awaiting pricing.
	Rift House Primary School Heating, DHW Boiler Plant Renewal	94	94	0	94	0	94	0	GRANT	Scheme on going.
9293	Rossmere Primary School Fire Doors	35	35	35	0	0	35	0	GRANT	Scheme complete.
	Springwell Special School Oven and Hob Induction	13	13	0	13	0	13	0	GRANT	Works to commence October 23 (Half term).
	Throston Primary School Heating, Pipework, radiators and fan replacement	52	52	0	52	0	52	0	GRANT	Scheme awaiting pricing.
	Throston Primary School Heat Source	25	25	0	25	0	25	0	GRANT	Scheme in design stage.
	Throston Primary School Emergency Boiler Replacement	24	24	0	24	0	24	0	GRANT	Emergency works, used contingency unallocated funding.
9244	High Tunstall School MLD ARP	968	968	280	688	0	968	0	GRANT	Scheme on going.
9004	Schools General - Conditions unallocated	112	19	0	19	0	19	0	GRANT	Funding to be used for 23/24 Condition shemes.
9004	Schools General - Contingency	75	66	0	66	0	66	0	GRANT	
9004	Schools General - Suitability Unallocated (SEMH)	743	743	0	743	0	743	0	RCCO	Use of funding is being considered in the High Needs Block review.
9004	Schools General - Special Provision	564	518	0	518	0	518	0	GRANT	
9004	Schools General - Basic Need	600	600	0	600	0	600	0	GRANT	
7149	New Children's Homes	216	75	0	75	0	75	0	UPDB	
7768	Supporting Treatment and Recovery Together (START) – Hartlepool's Substance Misuse Service	3,000	3,000	0	3,027	0	3,027	27	UPDB	Public Health funding transferred from Stepping Stones project into this scheme.
8072	ICS Case Management Improvement	37	37	0	37	0	37	0	MIX	
8218	Youth Service Portable MUGA	5	5	0	0	0	0	(5)	GRANT	
9164	Youth Justice Vehicle	22	22	22	0	0	22	0	RCCO	
8946	PH - Stepping Stones Project	38	27	0	0	0	0	(27)	GRANT	Funding transferred to START Substance Misuse Service.
9246	Children's Centre Family Hub	30	30	0	30	0	30	0	GRANT	Capital expenditure to support the development of Family Hubs.
Total Children's and Joint Commissioning Services		9,979	8,976	397	8,557	0	8,954	(22)		

Key	Revenue Contribution towards Capital	GRANT	Grant Funded
RCCO	Combination of Funding Types	CAP REC	Capital Receipt
MIX	Unupported Corporate Prudential Borrowing	UPDB	Unupported Departmental Prudential Borrowing
UCPB	Supported Capital Expenditure (Revenue)	CORP	Corporate Resources
SCE			

CAPITAL MONITORING REPORT PERIOD ENDING June 30th 2023

Project Code	Scheme Title	A Full Budget £'000	B 2023/24 Budget £'000	C 2023/24 Actual as at 30/06/23 £'000	D 2023/24 Expenditure Remaining £'000	E Expenditure Rephased into 2024/25 £'000	F (C+D+E) Total Expenditure £'000	G (F-B) Variance from Budget £'000	Type of Financing	2023/24 COMMENTS
Finance & Policy Committee										
8306	Schools - Kitchen Refurbishment	261	261	0	61	200	261	0	RCCO	Funds earmarked for replacement of equipment.
Finance & Policy Committee Sub Total		261	261	0	61	200	261	0		
Regeneration Committee										
S106	Developers Contribution Fund	4,580	4,580	8	113	4,459	4,580	0	GRANT	Further details are set out in Appendix O - see also 7440 as scheme includes £91k of S106 contributions.
Regeneration Committee Sub Total		4,580	4,580	8	113	4,459	4,580	0	GRANT	
7222	Sustainable Warmth LAD3	2,047	1,109	351	758	0	1,109	0	GRANT	Underspend in relation to HUG1 has been transferred to LAD3 at the funders request. Additional funding has been awarded. Amount expected to be confirmed and received in Quarter 2. Funding is for works on low income households heated by mains gas.
7272	Wheelie Bin Purchase	90	90	21	69	0	90	0	UDPB	
7344	NIP - Hindpool Close Play Area	40	36	0	36	0	36	0	UDPB	Scheme to be revised.
7347	NIP - CCTV in Parks	350	60	0	0	0	0	(60)	MIX	Scheme complete.
7436	NIP - Stranton Cemetery Car Park	50	50	0	50	0	50	0	MIX	Scheme on hold, funding earmarked for wider Stranton Cemetery plans.
7437	NIP - Sinking Fund	62	62	0	62	0	62	0	UDPB	Funds earmarked for replacement of play equipment.
7440	NIP - Central Park	120	91	85	6	0	91	0	MIX	S106 Funds - See Appendix O.
7553	Seaton Toilets	435	355	18	337	0	355	0	GRANT	
7561	Green Homes Grant - LAD2	663	22	0	22	0	22	0	GRANT	
7878	Community Safety CCTV Upgrade	79	9	0	9	0	9	0	UDPB	
8996	NIP - Improvements to Parks	314	73	10	63	0	73	0	MIX	
8997	NIP - Unallocated	16	9	0	0	0	0	(9)	GRANT	Currently unallocated.
9147	NIP - CCTV in parks, Support	34	25	0	25	0	25	0	GRANT	
9170	Sustainable Warmth HUG1	117	117	105	12	0	117	0	GRANT	HUG - Home upgrade for low income households off-gas grid.
9233	SEASCAPES - Coast to Clavering route	22	22	3	19	0	22	0	GRANT	
NEW	Waste Transfer Station	200	200	0	200	0	200	0	GRANT	Funding from redemption of SITA shares transferred to capital to support future capital scheme.
NEW	Grounds Commuted sum	22	22	0	22	0	22	0	GRANT	
7333	EDM Seaton Additional Car Parking Facilities	87	87	0	87	0	87	0	UDPB	
7357	15 Church Street Renovation	1,146	133	0	0	0	0	(133)	MIX	Scheme complete. It is proposed that the underspent budget is transferred to the Levelling Up Production Village scheme.
7466	DSO Vehicle Purchase	6,832	6,832	110	2,316	4,406	6,832	0	UDPB	The expenditure remaining and rephased figures are based on a preliminary assessment in advance of a more accurate review to be carried out as part of the annual Vehicle Replacement report.
7577	Hartlepool North NDIP Study	50	50	0	0	50	50	0	UDPB	Scheme pending announcement of additional funding expected to be confirmed October 2023.
7900	EDM Hartlepool Marina - North Pier	175	175	0	175	0	175	0	GRANT	Possible spend 2023/24, awaiting outcome of Environment Agency report.
7902	EDM Hartlepool Drainage Schemes	36	30	0	0	30	30	0	MIX	
8444	EDM Town Wall Strengthening	46	21	0	21	0	21	0	MIX	
8578	EDM Management Unit Study	28	28	0	0	28	28	0	GRANT	Potential for future spend if match funding is available to enable funding of larger scheme.
LTP	Local Transport Plan (LTP) Schemes	3,738	3,738	576	2,536	626	3,738	0	GRANT	Various Highways & Traffic schemes.
HIFP	Additional Highway Schemes HIFP	356	332	0	0	0	0	(332)	MIX	Currently Unallocated.
Neighbourhoods Committee Sub Total		17,155	13,778	1,279	6,825	5,140	13,244	(534)		
Development, Neighbourhood & Regulatory Services Total		21,996	18,619	1,287	6,999	9,799	18,085	(534)		

Key

RCCO Revenue Contribution towards Capital
MIX Combination of Funding Types
UCPB Unsupported Corporate Prudential Borrowing
SCE Supported Capital Expenditure (Revenue)

GRANT Grant Funded
CAP REC Capital Receipt
UDPB Unsupported Departmental Prudential Borrowing
CORP Corporate Resources

CAPITAL MONITORING REPORT PERIOD ENDING June 30th 2023

Project Code	Scheme Title	A Full Budget £'000	B 2023/24 Budget £'000	C 2023/24 Actual as at 30/06/23 £'000	D 2023/24 Expenditure Remaining £'000	E Expenditure Rephased into 2024/25 £'000	F (C+D+E) Total Expenditure £'000	G (F-B) Variance from Budget £'000	Type of Financing	2024/25 COMMENTS
7260	City Challenge Clawback	9	9	0	0	0	0	(9)	RCCO	Schemes complete.
7623	Corporate IT Projects	12	12	0	0	0	0	(12)	MIX	Schemes complete.
	Corporate Projects	109	109	0	0	0	0	(109)	MIX	Schemes complete.
	Finance, IT and Digital Total	130	130	0	0	0	0	(130)		

Key	Revenue Contribution towards		
RCCO	Capital	GRANT	Grant Funded
MIX	Combination of Funding Types	CAP REC	Capital Receipt
	Unsupported Corporate Prudential		
UCPB	Borrowing	UDPB	Unsupported Departmental Prudential Borrowing
	Supported Capital Expenditure		
SCE	(Revenue)	CORP	Corporate Resources

CORPORATE

5.1 APPENDIX N

CAPITAL MONITORING REPORT PERIOD ENDING June 30th 2023

Project Code	Scheme Title	A Full Budget £'000	B 2023/24 Budget £'000	C 2023/24 Actual as at 30/06/23 £'000	D 2023/24 Expenditure Remaining £'000	E Expenditure Rephased into 2024/25 £'000	F (C+D+E) Total Expenditure £'000	G (F-B) Variance from Budget £'000	Type of Financing	2023/24 COMMENTS
7036	Uncommitted CCF	226	222	0	222	0	222	0	MIX	Unallocated funding.
7041	Corporate Capital Pot	248	429	0	429	0	429	0	RCCO	Unallocated funding.
7065	Fire Risk Assessments	100	85	0	85	0	85	0	MIX	
		37	37	0	0	0	0	(37)	UDPB	Scheme not progressing as has been superseded by a wider scheme with grant funding secured.
7072	Seaton Library DDA toilet									
7200	Civic Centre Capital Project	75	62	0	62	0	62	0	UDPB	Scheme on hold.
7336	Borough Hall - Upgrade Fixtures and Fittings	8	8	0	0	0	0	(8)	MIX	Scheme complete.
7591	Mill House Capital	126	126	0	0	0	0	(126)	MIX	Scheme complete.
		40	38	0	0	0	0	(38)	RCCO	Scheme not progressing - wider scheme in place.
7617	Borough Hall - Lighting and Wiring									
8970	Historic Quay Dilapidation Work	97	97	0	97	0	97	0	RCCO	Budget relates to the lease to NMRM.
		63	63	0	0	0	0	(63)	RCCO	Scheme not progressing - wider landlord improvements have been progressed.
7539	Throston Youth Project - Resurface Car Park									
		45	45	0	0	0	0	(45)	RCCO	Scheme not progressing - wider scheme in place.
New	Borough Hall - Major Refurb Works									
7771	Borough Hall - Lighting Replacement	0	45	11	34	0	45	0	RCCO	Scheme on-going.
7623	Corporate IT Equipment - Laptops	625	8	0	0	0	0	(8)	RCCO	Scheme complete.
Corporate Total		1,690	1,265	11	929	0	940	(325)		

Key

RCCO Revenue Contribution towards Capital
MIX Combination of Funding Types
UCPB Unsupported Corporate Prudential Borrowing
SCE Supported Capital Expenditure (Revenue)

GRANT Grant Funded
CAP REC Capital Receipt
UDPB Unsupported Departmental Prudential Borrowing
CORP Corporate Resources

SECTION 106 DEVELOPERS CONTRIBUTIONS as at 30th June, 2023

	Affordable Housing Contributions ****	Cycleway	Highways	Highways General	Bus Stop	Green Infrastructure	Maintenance	Play	Off Site Recreational **	Public Art	Sports	Ecological Mitigation *****	Traffic Calming	Education	Coastal	Health	Restoration - Security Bond ***	Other Service Areas Total
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Committed Balance brought forward (A+B-C) 1st April, 2023 *	1,269	732	1,320	0	0	178	0	132	154	5	139	124	9	1,275	38	41	100	4,247
Amounts Received in Year 2023/24 (B) Port Homes - Seaton Miller Homes, Phase 1B - Upper Warren Placefirst - Land at Rodney Street				11							56	103		303	7	34		74143
Total income	0	0	0	11	0	0	0	0	0	0	56	13	0	303	7	34	0	424
Sub Total - revised Balance	1,269	732	1,320	11	0	178	0	132	154	5	195	137	9	1,578	45	75	100	4,671
Actual & Forecast Expenditure as at 31st March 2024 (C) Affordable Housing Schemes Central Park Wynyard, Manorside Wynyard, South Pentagon Ward Jackson Park Seaton Golden Flats Saltaire Terrace Brougham Merlin Way Walking Links Bridleway Four Winds Summerhill	1,269							7	91									09174427943248363
Sub Total Expenditure	1,269	0	0	0	0	91	0	29	91	0	0	0	0	0	0	0	0	211
Forecast Committed Balance Remaining (A+B-C) 31st March, 2024 *	0	732	1,320	11	0	87	0	103	63	5	195	137	9	1,578	45	75	100	4,460

*Balances relate to amounts received and earmarked for purposes specified in developer agreements, but not yet transferred to a budget/scheme. However further expenditure is in the process of being planned and committed.

** To be used in vicinity of the Britmag site including but not limited to Central Park.

*** Held as security in case of any remedial action required during the operational life of the Wind Turbine.

**** All affordable housing contributions are earmarked for additional HRA houses.

***** This includes £27k for 'Dog Control orders' however if the measures are not needed then the funds are repayable.

Off Site - part of these contributions are included in the Capital NIP scheme Budget Project 7440

Sports also includes contributions for Playing Pitches, Tennis Courts and Bowling Greens

Adjustment - net nil impact on overall balances.

FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: LOCAL COUNCIL TAX SUPPORT 2023/24

Report of: Director of Finance, IT and Digital

Decision Type: Budget and Policy Framework

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:

- where people are enabled to live healthy, independent and prosperous lives.
- of resilient and resourceful communities with opportunities for all.

2. PURPOSE OF REPORT

2.1 The purpose of the report is to:

- i) Update Members on the operation of the Local Council Tax Support (LCTS) scheme; and
- ii) Set out options for a new income banded / grid scheme for working age applicants from 1st April 2024 to increase the overall level of support for the lowest income families, improve the level of Council Tax collection and to reduce the administrative burden placed on the Council by the introduction of Universal Credit,

3. BACKGROUND

3.1 Local Council Tax Support (LCTS) was introduced by Central Government in April 2013 as a replacement for the Council Tax Benefit scheme administered on behalf of the Department for Work and Pensions (DWP). As part of the introduction, the Government:

- Placed the duty to create a local scheme for Working Age applicants with billing authorities;
- Reduced initial funding by the equivalent of ten per cent from the levels

- paid through benefit subsidy to authorities under the previous Council Tax Benefit scheme; and
 - Prescribed that persons of Pension age would be dealt with under regulations set by Central Government and not the authorities' local scheme.
- 3.2 Since that time, funding for the Council Tax Support scheme has been amalgamated into other Central Government grants paid to Local Authorities and also within the Business Rates Retention regime. It is now generally accepted that it is not possible to identify the amount of funding actually provided from Central Government sources, but that this has been significantly reduced.
- 3.3 The current Council Tax Support scheme administered by the Council is divided into two schemes, with pension age applicants receiving support under the rules prescribed by Central Government, and the scheme for working age applicants being determined solely by the local authority.
- 3.4 Pensioners, subject to their income, can receive up to 100 per cent support towards their council tax. The Council has no power to change the level of support provided to pensioners and therefore any changes to the level of LCTS can only be made to the working age scheme.
- 3.5 When Council Tax Support was introduced in 2013, for working age applicants, the Council broadly adopted the previous means tested Council Tax Benefit scheme as the basis of awarding support. Due to the reduction in finance, the Council reduced the maximum level of support available to working age applicants in 2014/15 to 88%. This means that for 2023/24 a Band A working household in receipt of full support will pay £184 (inclusive of Council, Cleveland Fire Authority and the Police and Crime Commissioner)
- 3.6 The only other changes made were in line with prescribed requirements (set by Government) and to bring the scheme into line with either Housing Benefit or Universal Credit

4. ISSUES WITH THE CURRENT SCHEME

- 4.1 There are a number of issues with the current scheme that will need addressing if the system is to continue to provide effective support to low-income taxpayers and also if the Council is able to provide the service in an efficient manner. The main issues are as follows:
- The need to assist low-income households and assist in the collection of Council Tax;
 - The introduction of Universal Credit for working age applicants; and
 - The need for a simplification of the scheme.

The need to assist low-income households and assist in the collection of Council Tax

- 4.2 Similar to other authorities, the Council, now requires all working age applicants to pay a minimum payment (12%). Under the previous national scheme (Council Tax Benefit), almost 75% of working age applicants would not have been required to pay any Council Tax and would have received full (100%) support.
- 4.3 A key principal of our existing scheme is that all working age households pay something towards Council Tax. Cost of living concerns, amplified on the back of the Covid-19 pandemic, have resulted in a number of local authorities reconsidering this principle and increasing the level of support provided. There are also concerns around the collectability of debt.
- 4.4 The costs of collection from LCTS households has increased significantly over the years. These costs are borne solely by the Council as the billing authority. These households are less likely to pay by Direct Debit, instead choosing to make payment in different ways e.g. cash, either at the Civic Centre or via the Post Office and Paypoint network at local shops. In addition there is a greater likelihood that payment is ultimately obtained through Attachment of Benefit. All recovery action is managed sensitivity, whilst seeking to maximise income collection.
- 4.5 Attachment of Benefits (AOB) can only be requested to the DWP following the Council securing a liability order via the Magistrates Court. Currently the highest attachment allowable is £28.94 per month, with the most common attachment being £18.44 (single person over 25 years old). Only one AOB deduction can be active at any one time. In the best case scenario, such an attachment could only be secured 3 months into the financial year, thus allowing 9 months of collection. The maximum collectable in this scenario is £260.46 in total for the first year. Whilst the least amount payable for a Band A property is £184 as set out in section 3.5 above, in many circumstances, unless individual's circumstances change, debt continues to accrue year on year.
- 4.6 Currently 5,609 Council Tax accounts have an Attachment of Benefits, though these will not all be current LCTS accounts. In addition there are 5,449 Liability Orders at pending stage. As at the end of July 2023 £4.147m of debt is outstanding to those with Attachment of Benefits. Collection levels are lower in comparison to non LCTS households.
- 4.7 With the collection difficulties experienced, the relatively lower level of payment and the high administration costs incurred, it can ultimately make the amounts economically unviable to collect.

Council Tax Support and the roll out of Universal Credit

- 4.8 The introduction of Universal Credit within the area has brought a number of significant challenges to both the administration of Council Tax Support and also the collection of Council Tax generally.

- 4.9 The Council currently operates a £ sensitive Council Tax Support scheme, whereby changes to Universal credit and other benefits, changes Council Tax Support. Unlike Housing Benefit, Universal credit has a high number and frequent changes for individuals. The number of changes notified received from the DWP requiring a change to Council Tax Support entitlement currently stands at c54,000 per annum and is expected to rise to c70,000 changes per annum from the end of 2024. On average 40% of Universal Credit claimants have between eight and twelve changes in entitlement per annum.
- 4.10 These changes result in amendments to Council Tax liability, the re-calculation of instalments, cancellation and recalculation of Direct Debits where established, pause to enforcement action, and general delays in collection and recovery. Ultimately there is a loss in collection of Council Tax.
- 4.11 As well as losses in collection, the increased costs of administration through multiple changes with significant additional staff and staff time being needed.
- 4.12 It is clear that the existing means tested Council Tax Support scheme, which is too reactive to change, will not be viable in the longer term now that Universal Credit has been rolled out fully within the area and the managed migration from legacy benefits (to be completed by the end of 2024).

The need for a simplified approach to the Council Tax Support Scheme.

- 4.13 Notwithstanding the introduction of Universal Credit, the existing scheme is based on an ‘old fashioned;’ means tested benefit scheme. It has major defects namely:
- It is complex for customers to understand and is based on a complex calculation of entitlement;
 - The administration for staff is complex, with staff having to request significant amounts of information from applicants;
 - Staff have to undergo significant training to be proficient in processing claims;
 - The timescales for processing applications is lengthy, mainly due to the complexity and evidence required to support the applications; and
 - The administration of the scheme is costly when compared to other discounts for Council Tax.

5. PROPOSAL FOR THE 2024/25 COUNCIL TAX SUPPORT SCHEME

- 5.1 In view of the problems being experienced with the current scheme, it is proposed that an alternative approach be taken from 2024/25. The approach has been to fundamentally redesign the scheme to address all of the issues with the current scheme and in particular:
- The level of support available to the poorest households;
 - The problems with the introduction of full-service Universal Credit; and

- The significant increase in administration costs due to the high level of changes received in respect of Universal Credit;

5.2 Design and modelling work has been ongoing since early this year on a new scheme. This work has considered schemes operated elsewhere in the region, and has been supported by external expertise. If agreed by members, consultation needs to be undertaken with the public and the major precepting authorities. If accepted by the Council later in the year, the new scheme will take effect from 1st April 2024.

5.3 The proposed new scheme ensures that more support will be given to those working age households on the lowest of incomes than in the current scheme, based on the following simple income grid. Note the income grid would be updated for inflation each year from April 2025;

	Passported	Single	Single with 1 child	Single with 2 or more children	Couples	Couple with 1 child	Couple with 2 or more children
Discount Level	Weekly Income Levels £						
Band 1 (90%)	Relevant Benefit	£0.00 to £110.10	£0.00 to £176.16	£0.00 to £242.22	£0.00 to £154.14	£0.00 to £225.71	£0.00 to £286.26
Band 2 (70%)	N/A	£110.11 to £198.18	£176.17 to £264.24	£242.23 to £324.80	£154.15 to £264.24	£225.72 to £309.38	£286.27 to £374.34
Band 3 (40%)	N/A	£198.19 to £236.72	£264.25 to £280.76	£324.81 to £385.35	£264.25 to £319.29	£309.39 to £352.32	£374.35 to £440.40
Band 4 (20%)	N/A	£236.73 to £280.76	£280.77 to £308.27	£385.36 to £495.44	£319.30 to £374.33	£352.33 to £407.36	£440.41 to £528.47

- It is proposed that the highest level of discount will be at a maximum level of liability (90%), Band 1. All current applicants that are in receipt of a 'passported benefit' such as Income Support, Jobseeker's Allowance (Income Based) and Employment and Support Allowance (Income Related) receive maximum discount;
- All other discount levels are based on the applicant's and partner's, (where they have one) net income;
- The scheme allows for variation in household size with the levels of income per band increasing where an applicant has a partner, and / or dependants;

5.4 For all of the above options, the following key features will apply:

- To encourage work, a standard £25 per week disregard will be provided against all earnings. This will take the place of the current standard disregards and additional earnings disregards;

- Disability benefits such as Disability Living Allowance and Personal Independence Allowance will continue to be disregarded;
- Where any applicant, their partner or any dependent child/children are disabled, a further disregard of £40 per week will be given, thereby maintaining the current level of support to those with disabilities;
- Carer's Allowance and the Support Component of Employment and Support Allowance will be disregarded;
- Child Benefit and Child Maintenance will be disregarded;
- The following elements of Universal Credit will also be disregarded:
 - An amount in respect of the Housing Element;
 - Limited Capability for Work and Work Related Activity Element;
 - Carer's Element; and
 - Disabled Child Element
- The total disregard on war pensions and war disablement pensions will continue (maintaining the Council's commitment to the Armed Forces Community Covenant);
- Extended payments will be removed; and
- The capital limit will be reduced to £6,000 from £16,000 with no tariff (or assumed income) being applied.

5.5 All of the proposed scheme options specified below, have the same 'grid' and are identical in other respects except for non-dependant deductions. In relation to non-dependant charges, the options are as follows:

- Option 1 - no non-dependant charges;
- Option 2 - a flat rate non dependant deduction of £5 per week for each non-dependant in the household;
- Option 3 - a flat rate non dependant deduction of £7.50 per week for each non-dependant in the household; and
- Option 4 - a flat rate non dependant deduction of £10 per week for each non-dependant in the household.

Whilst option 1 would be significantly simpler to administer, it would result in the premise that a non-dependent living at home is not required to contribute to household costs.

How the proposed scheme would address the current problems

5.6 With the simplicity of the proposed new scheme and by taking a more 'Council Tax discount approach', it will address the problems associated with the increased administration caused by failings in the current scheme and Universal Credit as follows:

- **The scheme will require a simplified claiming process.** All applicants will see a significant reduction in the complexity of the claiming process and, where possible, Council Tax Support will be awarded automatically. For Universal Credit applicants *any* Universal Credit data received from the Department for Work and Pensions (DWP) will be treated as a claim for Council Tax Support. Where information is received from DWP, the entitlement to Council Tax Support will be processed automatically without

the need to request further information from the taxpayer. These changes will have the following distinct advantages namely:

- **Speed of processing** – all claims will be able to be calculated promptly and largely automatically without the need to request further information which inevitably leads to delays (other than capital limits or if non-dependants reside at the property);
- **Maximising entitlement to every applicant.** As there will no requirement for Universal Credit applicants to apply separately for Council Tax Support, and for all other applicants, the claiming process will be simplified significantly. Entitlement to Council Tax Support will be maximised with a reduced risk of loss of discount or the need for backdating. Note, it is proposed to increase backdating provision from 1 month to 1 year under the new scheme after the transition period;
- **Maintenance of collection rates** – the new scheme will avoid constant changes in discount, the need for multiple changes in instalments and therefore assist in improving and increasing collection rates. The increased level of discount will also assist all those applicants on the lowest levels of income, again improving the overall collection rate;
- **The income bands are sufficiently wide to avoid constant changes in discount.** The current Council Tax Support scheme is very reactive and will alter even if the overall change to the person's liability is small. This is leading to constant changes in Council Tax liability, the need to recalculate monthly instalments and the requirement to issue a large number of Council Tax demands. The effect of this is that Council Tax collection is reduced. The new scheme, with its simplified income banding approach will have the following advantages:
 - Only significant changes in income will affect the level of discount awarded;
 - Council Taxpayers who receive Council Tax Support will not receive multiple Council Tax demands and adjustments to their instalments; and
 - The new scheme is designed to reflect a more modern approach, where any discount changes it will be effective from the day of the change rather than the Monday of the following week.

The effect of the proposed scheme on individual households

- 5.7 The proposed changes will have a significant effect on households within the Council's area, especially those on the lowest of incomes. Current modelling allows us to project the likely outcomes for current households given their individual circumstances, as set out below. It should be noted that this is based on current circumstances at the point in time the data extract was ran. If recipients moved between income bands this could have either a further, and potentially significant favourable or detrimental impact. However, recipients will be better able to understand the impact of income fluctuations given a simpler scheme.

	Option 1 No NDD	Option 2 £5 NDD	Option 3 £7.50 NDD	Option 4 £10 NDD
Increased Support	7,470 (87.5%)	7,485 (87.3%)	7,364 (86.3%)	7,320 (85.8%)
Reduced Support	1,071 (12.5%)	1,084 (12.7%)	1,166 (13.7%)	1,210 (14.2%)
	8,541	8,569	8,530	8,530

- 5.8 Inevitably, with any change in scheme, some households may lose out, although the proposed scheme has been designed to protect the most vulnerable and the vast majority of applicants. The numbers seeing a reduction in support based on current circumstances are shown below.

Reduced Support	Option 1 No NDD	Option 2 £5 NDD	Option 3 £7.50 NDD	Option 4 £10 NDD
Less than £5 per week	281	274	354	383
£5.01 to £10 per week	556	572	571	571
£10.01 or more	234	238	241	256
	1,071	1,084	1,166	1,210

- 5.9 An examination of these cases show that the majority of these cases either will have capital in excess of the proposed new level, £6,000, or have large families where they will be affected by the limitation of dependants in the income-grid. It is therefore likely that the numbers receiving reduced support will reduce over time as capital levels fall. For information, the two dependant restriction is in line with other welfare benefits such as Housing Benefit, Universal Credit and Council Tax Support for Pension Age applicants.
- 5.10 In order to assist any household who may lose entitlement, the council will rely on its exceptional hardship scheme to protect individuals who experience exceptional hardship. Where any applicant is likely to experience exceptional hardship, they will be encouraged to apply for an exceptional hardship payment. The Council will consider all applications for exceptional hardship on an individual case-by-case basis, in line with the policy, taking into account available income and essential outgoings. Where appropriate further support will be given to the applicant.
- 5.11 This approach will enable individual applicants to be dealt with in a fair and equitable manner. The Exceptional Hardship Scheme will fall to be paid through the Collection Fund, so ensuring major preceptors fund their element of cost.

6. FINANCIAL IMPLICATIONS

- 6.1 The current Council Tax Support scheme has a budgeted cost of £14.251m which is factored into the Base calculation each year. Costs are shared between the Council and the major precepting authorities in the following proportions for 2023/24:

- Hartlepool Borough Council (83.6%)
- Police and Crime Commissioner for Cleveland (12.6%)
- Cleveland Fire Brigade (3.8%)

- 6.2 Based on the proposals set out in Section 5 of the report, and using current caseload, the additional cost per option is as follows.

	Option 1 No NDD	Option 2 £5 NDD	Option 3 £7.50 NDD	Option 4 £10 NDD
Increase in costs	£260,802	£179,090	£140,089	£102,349
Council Share	£218,030	£149,719	£117,114	£85,564

- 6.3 Whilst this represents a cost to the council, the simplified scheme will have financial benefits through;

- Sustaining current collection rates within the Collection fund;
- Avoidance of increased staffing and collection costs to manage the increasing complexity and volatility of the existing scheme given migration to Universal credit; and
- Printing and postage cost reduction that will be taking into account in the MTFS.

In addition, it is likely that costs of Council Tax Support overall will continue to reduce relative to budget as caseload, and specifically pensioner caseload, is on a general downward trend over a number of years.

- 6.4 The cost of the any revised scheme proposed will be factored into the Council Tax Base calculations.

7. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	No relevant issues.
FINANCIAL CONSIDERATIONS	The financial implications are fully set out in the main body of the report.
LEGAL CONSIDERATIONS	<p>Schedule 1A (3) of the Local Finance Act 1992, states that before making a scheme, the authority must:</p> <ul style="list-style-type: none"> • consult any major precepting authority which has the power to issue a precept to it; • publish a draft scheme in such manner as it thinks fit; and • consult such other persons as it considers are likely to have an interest in the operation of the scheme. <p>In addition to the statutory consultation, in order to set a new scheme, the Council is obliged to make resolution by 11th March</p>

	of the year prior to the scheme coming into place.
CHILD AND FAMILY POVERTY	An impact assessment is attached at Appendix A
EQUALITY AND DIVERSITY CONSIDERATIONS	An impact assessment is attached at Appendix B
STAFF CONSIDERATIONS	No relevant issues.
ASSET MANAGEMENT CONSIDERATIONS	No relevant issues.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No relevant issues.
CONSULTATION	It is proposed to open a public consultation until the 10 th of November (8 week period) in addition to consulting with the two major precepting authorities.

8. RECOMMENDATIONS

8.1 It is recommended that Members:

- i) Note the current costs and administration impact/risks associated with the LCTS scheme;
- ii) Consider the options for a new income banded / grid scheme for working age applicants from 1st April 2024 to reduce the administrative burden placed on the Council by the introduction of Universal Credit, to increase the overall level of support for the lowest income families and to improve the level of Council Tax collection;
- iii) Determine an option for the basis of consultation with the public and major precepting authorities on the introduction of such scheme; and
- iv) Agree to receive a further report to November Finance and Policy setting out the results of the consultation, in order to consider and determine the option to be recommended to Council.

9. REASONS FOR RECOMMENDATIONS

9.1 To set out options for a new income banded / grid scheme for working age applicants from 1st April 2024 to reduce the administrative burden placed on the Council by the introduction of Universal Credit, to increase the overall

level of support for the lowest income families and to improve the level of Council Tax collection;

10. BACKGROUND PAPERS

- 10.1 Local Council Tax Support 2023/24 – Report to Finance and Policy Committee 26 September 2022.

11. CONTACT OFFICERS

James Magog
Director of Finance, IT and Digital
Email: james.magog@hartlepool.gov.uk
Telephone: 01429 523093

Sign Off:-

Managing Director	Date: 07/09/2023
Director of Finance, IT and Digital	Date: 04/09/2023
Director of Legal, Governance and HR	Date: 04/09/2023

Poverty Impact Assessment Form

1. Is this decision a Budget & Policy Framework or Key Decision? Yes

If YES please answer question 2 below

2. Will there be an impact of the decision requested in respect of Child and Family Poverty? YES

If YES please complete the matrix below

GROUP	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE
Young working people aged 18 - 21	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Those who are disabled or suffer from illness / mental illness	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Those with low educational attainment	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Those who are unemployed	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Those who are underemployed	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Children born into families in poverty	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.

5.2 Appendix A

Those who find difficulty in managing their finances	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Lone parents	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.
Those from minority ethnic backgrounds	✓	✓	✓	The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable. The proposed changes will impact dependent on individual circumstances.

Poverty is measured in different ways. Will the policy / decision have an impact on child and family poverty and in what way?				
Poverty Measure (examples of poverty measures appended overleaf)	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE
Low Income Individuals, Families and Households	Yes	Yes	Yes	<p>The operation of a Local Council Tax Support Scheme means that those meeting the eligibility criteria will receive a reduction to Council Tax payable.</p> <p>Under the proposed changes, couples and lone parents with 2 or more children are combined into the same income level. This means that the income band is the same regardless of whether a claimant has 2 children or more. This will negatively impact on some claims, depending on their circumstances. However, this aligns the approach to other means tested Government benefits.</p> <p>This impact is a result of having a simplified scheme and the need to ensure costs are kept affordable.</p> <p>The Council has an exceptional hardship fund (Section 13a payments) for any claimant who experiences exceptional hardship</p>
Overall impact of Policy / Decision				
POSITIVE IMPACT		Yes	ADJUST / CHANGE POLICY / SERVICE	
NO IMPACT / NO CHANGE		N/A	STOP / REMOVE POLICY / SERVICE	
ADVERSE IMPACT BUT CONTINUE		N/A		
Examples of Indicators that impact of Child and Family Poverty.				
Economic				
Children in Low Income Families (%)				

Children in Working Households (%)
Overall employment rate (%)
Proportion of young people who are NEET
Adults with Learning difficulties in employment
Education
Free School meals attainment gap (key stage 2 and key stage 4)
Gap in progression to higher education FSM / Non FSM
Achievement gap between disadvantaged pupils and all pupils (key stage 2 and key stage 4)
Housing
Average time taken to process Housing Benefit / Council tax benefit claims
Number of affordable homes built
Health
Prevalence of underweight children in reception year
Prevalence of obese children in reception year
Prevalence of underweight children in year 6
Prevalence of obese children in reception year 6
Life expectancy

Equality Impact Assessment Form

Department	Division	Section	Owner/Officer
Finance, IT and Digital	Customer Services and IT	Benefits	James Magog
Service, policy, practice being reviewed/changed or planned	Local Council Tax Support Scheme 2024/25		
Why are you making the change?	Subject to consultation: to reduce the administrative burden placed on the Council by the introduction of Universal Credit, to increase the overall level of support for the lowest income families and to improve the level of Council Tax collection		
How might this impact (positively/negatively) on people who share protected characteristics?			
		<i>Please tick</i>	
		POSITIVELY	NEGATIVELY
Age			
The Government considered the position of low income pensioners associated with the abolition of Council Tax Benefit and the introduction of LCTS. The Government determined that unlike most other groups, pensioners cannot reasonably be expected to seek paid employment to increase their income. Therefore the Government determined that as a specific vulnerable group, low income pensioners should be protected from any reduction in support as a result of this reform. The Government has not changed its position on this core principle for 2024/25. A neutral relative impact is therefore envisaged.			
Disability			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Gender Re-assignment			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Race			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Religion			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Gender			✓
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Sexual Orientation			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			

Marriage & Civil Partnership			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Pregnancy & Maternity			
The proposed scheme continues with the core principle that every working age household should pay something towards Council Tax. The scheme does not provide protection of detriment to any specific working age group. A neutral relative impact is therefore envisaged.			
Has there been consultation /is consultation planned with people who will be affected by this policy? How has this affected your decision making?		The proposed scheme will be consulted upon prior to any implementation.	
As a result of your decision how can you mitigate negative/maximise positive outcomes and foster good relationships?		By applying the scheme fairly and consistently across all households within Hartlepool.	
Describe how you will address and monitor the impact		1. No Impact - No Major Change No new specific impact expected.	
		2. Adjust/Change Policy N/A	
		3. Adverse Impact but Continue as is N/A	
		4. Stop/Remove Policy/Proposal N/A	
Initial Assessment	04/09/23	Reviewed	
Completed		Published	

FINANCE AND POLICY COMMITTEE

19 SEPTEMBER 2023



Subject: TOBACCO CONTROL DRAFT STRATEGY
Report of: Director of Public Health
Decision Type: Key Decision (General Exception Notice Applies)

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.

2. PURPOSE OF REPORT

- 2.1 To share the draft Tobacco Control Strategy, ask for comments and seek approval from Finance and Policy Committee for final sign off of the strategy.

3. BACKGROUND

- 3.1 Smoking is one of the biggest causes of death and illness in the UK. There are still 7.3 million adult smokers in England and every year around 78,000 people in the England die from smoking, with many more living with debilitating smoking-related illnesses. Smoking increases your risk of developing more than 50 serious health conditions.
- 3.2 Hartlepool's prevalence of smoking for those aged 15 and above has fallen from 23.9% in 2013/14 to 19.7% in 2020/21. Throughout this period Hartlepool has remained significantly worse than the England average, but has followed a similar pattern in its decreasing rate. In 2020/21 Hartlepool had the 8th highest smoking rate for those aged 15 and above in England, and the highest in the North East.

- 3.3 This strategy outlines how we are going to improve this situation in Hartlepool and how we will work across the system to make changes to reduce the harms associated with smoking and second hand smoke.

4. PROPOSALS/OPTIONS FOR CONSIDERATION

- 4.1 We are seeking approval from the Finance and Policy Committee for final sign off of the draft Tobacco Control Strategy for Hartlepool (**Appendix 1**). The Strategy has been informed by the Hartlepool Smoking Needs Assessment findings (**Appendix 2**) and has been developed following a consultation event and engagement with partners. The following theme areas have been identified and are based on the findings from the needs assessment:
- 4.2 The draft strategy has informed the development of an action plan (**Appendix 3**) which will set out under each theme details of how we will deliver this priority areas, who will deliver, timescales and be informed by indicators in order to measure success through an outcome framework.
- 4.4 Governance of the strategy implementation will be through the Hartlepool Tobacco Alliance chaired by Public Health.

5. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	<p>The delivery of the strategy will be through the Tobacco Alliance and report to the Health and Wellbeing Board against progress on an agreed basis.</p> <p>This strategy will provide a focused effort to provide a partnership approach to addressing the harms associated with smoking and second-hand smoke and support those people to reduce the numbers of people smoking in Hartlepool.</p>
FINANCIAL CONSIDERATIONS	Public Health will be reviewing the Public Health grant to identify potential areas for investment. Hartlepool will also be part of the national pathfinder project and will have access to free vapes which will be offered through current services to adults at most risk.
LEGAL CONSIDERATIONS	None noted.
CHILD AND FAMILY POVERTY	A poverty impact assessment is attached at Appendix 4 to this report.

EQUALITY AND DIVERSITY CONSIDERATIONS	An equality and diversity impact assessment is attached to this report at Appendix 5 .
STAFF CONSIDERATIONS	None noted.
ASSET MANAGEMENT CONSIDERATIONS	None Noted.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	None noted.
CONSULTATION	<p>A partnership event was held in May with the following:</p> <ul style="list-style-type: none"> Office of Health inequalities and Disparities (OHID) Education Health watch 0-19 services School reps Community Navigator Teams Fresh Voluntary and Community Sector (VCS) Maternity services (in hospital/ out of hospital) START Primary Care Networks (PCNs) Adults and Children's social care teams Adults and Children's safeguarding Cleveland Police Cleveland Fire Brigade Neighbourhood Safety Teams North Tees and Hartlepool NHS Foundation Trust Tees Esk and Wear Valley Mental Health Services (TEWV) Public Protection and Licencing Housing Support Teams Pharmacies Hartlepool and Stockton Health (HASH) Commissioning Support Lived Experience / patient experience Groups Public Health

6. RECOMMENDATIONS

- 6.1 We are seeking approval from the Finance and Policy Committee for the final sign off of the draft Tobacco Control Strategy for Hartlepool.

7. REASONS FOR RECOMMENDATIONS

- 7.1 Focuses on prevention and the wider determinants of health to impact positively on the NHS and social care system by enabling early identification, help and support.

Supports joint cross sectoral action to deliver an increased focus on the prevention of issues relating to smoking.

Encourages collaborative work across organisational boundaries and disciplines to secure place based improvements that are tailored to local needs and assets.

Builds the capacity and capability across our workforce to reduce the harms related to smoking.

8. BACKGROUND PAPERS

- 8.1 Tobacco Control Draft Strategy (**Appendix 1**)
Smoking Needs Assessment (**Appendix 2**)
Action Plan (**Appendix 3**)

9. CONTACT OFFICERS

Craig Blundred, Director of Public Health, Children's and Joint Commissioning Services

craig.blundred@hartlepool.gov.uk

Tel: (01429) 523990

Sign Off:-

Managing Director	Date: 23 August 2023
Director of Finance, IT and Digital	Date: 23 August 2023
Director of Legal, Governance and HR	Date: 25 August 2023

Hartlepool Tobacco Control Strategy

2023-2028

Claire Robinson | Public Health Principal

Sue Leather | Advanced Public Health Practitioner



Foreword – Director of Public Health

Smoking is one of the biggest causes of death and illness in the UK. There are still 7.3 million adult smokers in England and every year around 79,000 people in the England die from smoking, with many more living with debilitating smoking-related illnesses. Smoking increases your risk of developing more than 50 serious health conditions. It is also a driver of health inequalities as smoking is much more prevalent in disadvantaged groups.

We have seen the prevalence of smoking in adults reduce consistently across England, the North East and Hartlepool over the last few years. Smoking prevalence in Hartlepool, however remains higher than the England and North East averages.

Smoking is a key driver of health inequalities and we know that the prevalence of smoking in the routine and manual occupational group is higher than any other group. We are committed to reducing health inequalities and this will be a key target for our work on smoking.

The negative impacts of smoking on our health and wellbeing are well known - smoking is the leading cause of preventable ill health and premature death. The reasons why people take up smoking and continue to smoke are complex. Whilst we know around a fifth of people in Hartlepool are smokers, we know that those living in our more deprived communities are much more likely to smoke than those in the least deprived areas. The impact of tobacco use is a key component of the deep rooted health inequalities that we are working hard to tackle in Hartlepool with renewed urgency and heightened ambition.

That is why I am pleased to introduce this bold and ambitious strategy for tobacco control in Hartlepool. To achieve our plans we know we will need to be ambitious in our approach to introduce and deliver the meaningful changes that will support smoke-free communities in Hartlepool.

This strategy, underpinned by a needs assessment, CleaR assessment (the CleaR assessment is an evidence-based self-assessment tool for measuring the success of local action to address harm from tobacco) and partnership event sets out our vision for Hartlepool and how we will work together with partners and communities to achieve our goals using a targeted evidence based approach. The strategy focuses on reducing the health inequalities caused by smoking, and supporting vulnerable groups to be smoke free, to protect children and young people from tobacco and encourage smoke free pregnancies. Whilst I recognise there is much work currently happening in Hartlepool, this strategy will continue to build on that existing work and build capacity and capability across our workforce to reduce the harms related to smoking.



Craig Blundred | Director of Public Health
Hartlepool Borough Council



Foreword – Council Leader

I am pleased to introduce our new Tobacco Control Strategy for Hartlepool which sets out our ambitions to work towards eliminating tobacco-related harm in our town, improving health outcomes for our residents and reducing the inequality gap between the wealthiest and poorest in our communities. The strategy looks beyond helping smokers to quit but also highlights how we will encourage smoke free pregnancies, protect our children and young people from tobacco harms. It identifies the work we need to do to address the wider determinants of tobacco related inequalities, such as reducing exposure to second-hand smoke and access to illicit tobacco.

Smoking tobacco remains the single most damaging action that an individual can do to their health and well-being. The health impact of tobacco usage on the population has been a cause of chronic illness and early death for many years. Whilst nationally there has been great progress to reduce smoking prevalence there are still 7.3million adult smokers in England and every year 78,000 people in England continue to die from smoking , with many more living with debilitating chronic smoking related illnesses.

Hartlepool's prevalence of smoking for those aged 15 years and over has also mirrored the national picture of gradual reduction in smoking prevalence but remains significantly worse than the national England average and currently Hartlepool has the highest smoking rate in the Northeast.

This strategy will be implemented through Hartlepool Tobacco Control Alliance Group and is a five year strategic plan for tackling the harms associated with smoking, providing a framework for a whole systems approach for partners to work together locally. The shared vision and clear actions defines how public service leads, local policy makers, commissioners, providers, businesses, the voluntary sector and most importantly the community itself can work together to reduce the number of people in Hartlepool who smoke and eventually eliminate the use of tobacco from the town.

I support the intentions of this strategy and look forward to taking great strides together over the next five years and achieving the goals set out in this strategy.



Mike Young | Council Leader
Hartlepool Borough Council



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Introduction

Smoking is the leading cause of death and illness in the UK and a key contributor to avoidable health inequalities in Hartlepool. There are still 7.3million adult smokers in England and every year around 78,000 people die in England from smoking, with many more living with debilitating smoking- related illnesses. Smoking increases your risk of developing more than 50 serious health conditions.

Whilst nationally there has been a reduction of smoking prevalence and smoking rates among young people and pregnant women have dramatically reduced, 8% of 15 year olds still smoke, risking a lifetime of ill health. Over 10% of pregnant women still smoke, with all the attendant risks of miscarriage, premature birth, still birth and neonatal complications. Smoking in the home not only damages the health of children but increases their chance of becoming smokers 4-fold.

Hartlepool's prevalence of smoking for those aged 15 and above has fallen during the period 2013/14 to 2020/21. However Hartlepool has remained significantly worse than the England average, but has followed a similar pattern in its decreasing rate. In 2020/21 Hartlepool had the 8th highest smoking rate for those aged 15 and above in England, and the highest in the North East.

The costs of smoking to society are significant 'Towards a smoke-free generation: tobacco control plan for England' identified that smoking causes around 79,000 preventable deaths in England and is estimated to cost our economy in excess of £11 billion per year.

- £2.5 billion costs attributed to the NHS
- £5.3 billion attributed to employers through absence from work

Smoking-related ill health also leads to increased costs for adult social care, one study estimates that local councils face a demand pressure of £760 million a year on domiciliary (home) care services, as a result of smoking-related health conditions.

National and Local Picture

Department of Health 'Towards a smoke-free generation: tobacco control plan for England'

Department of Health 'Towards a smoke-free generation: tobacco control plan for England'. In 2017 the Government set an objective for England to be Smoke free by 2030 meaning only 5% of the population would smoke by then. To provide access to stop smoking support for all with four ambitions

- The first smokefree generation
- A smoke free pregnancy for all
- Parity of esteem for those with mental health conditions
- Backing evidence based innovations to support quitting

The NHS Long Term Plan

Sets out new commitments to address the causes of ill health with more focus on prevention and a more systematic approach in addressing health inequalities and contribute to the government's ambition of five years of extra healthy life expectancy by 2035. The document sets out plans to target in relation to cutting smoking in pregnancy and people with long term mental health problems.

The Khan review: making smoking obsolete

The Khan review (June 2022) found that England would miss the national target of 5% by at least 7 years with the poorest areas not meeting it until 2044. To have any chance of hitting the smokefree target, nationally there is a need to accelerate the rate of decline. The review looked at best international evidence and current national policies and concluded that 15 national recommendations were required including four critical recommendations set out below:

1. Urgently invest £125 million per year in a comprehensive smokefree 2030 programme. Options to fund this include a 'polluter pays' levy.
2. Raise the age of sale of tobacco by one year, every year.
3. Offer vaping as a substitute for smoking, alongside accurate information on the benefits of switching, including to healthcare professionals.
4. The NHS needs to prioritise prevention with further action to stop people from smoking, providing support and treatment across all of its services, including primary care.

Local Picture

Tobacco use across Hartlepool

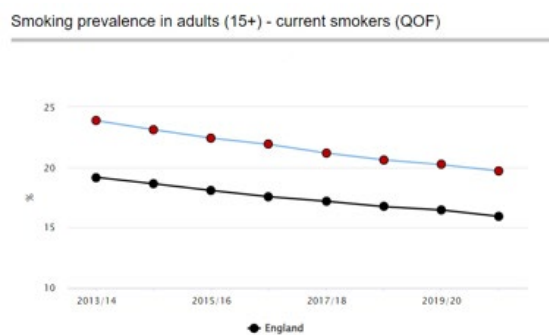


Figure 1: Smoking prevalence in adults (15+) – current smokers (QOF Source: QOF 2022)

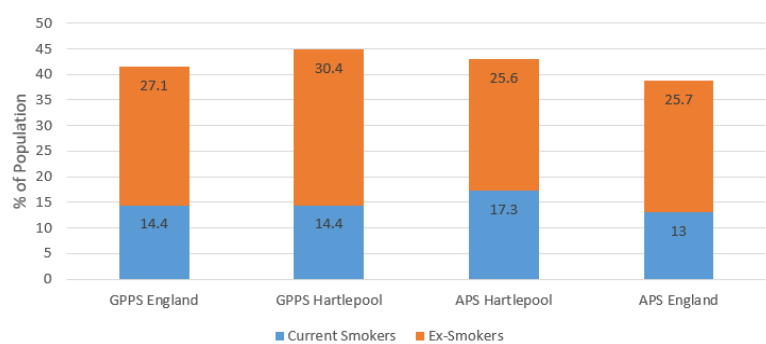


Figure 2: Proportion of population 18+ who are current smokers or ex- smokers: GP Population Survey 2020/21 & annual population survey 2021 Source: GPPS 2021 & APS 2021.

Hartlepool's prevalence of smoking for those aged 15 and above has fallen from 23.9% in 2013/14 to 19.7% in 2020/21. Throughout this period Hartlepool has remained significantly worse than the England average, but has followed a similar pattern in its decreasing rate. In 2020/21 Hartlepool had the 8th highest smoking rate for those aged 15 and above in England, and the highest in the North East.

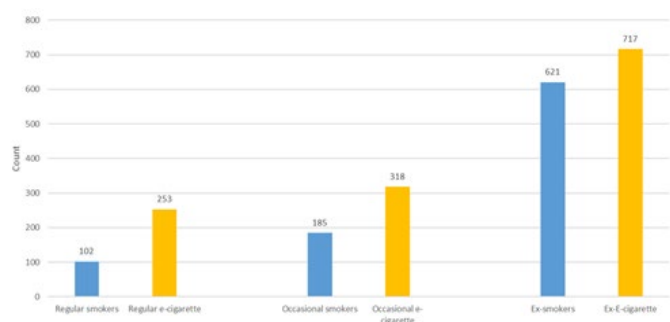


Figure 3: Cigarette & E-cigarette smoking status – Hartlepool Source: ASH Smokefree GB, 2022)

For young people, estimates for Hartlepool show that e-cigarettes are the more popular option than traditional cigarettes. Across all three categories, current user, occasional user and ex user, e-cigarettes was the larger figure

Local Picture

Smoking related harms across Hartlepool

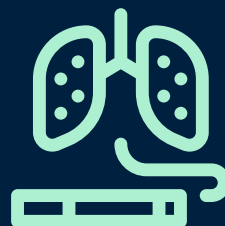
Hartlepool had significantly higher levels of smoking attributed mortality than England for the last five years.



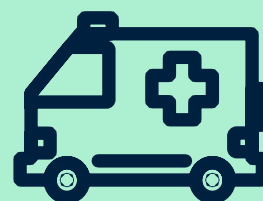
The gap between the England and Hartlepool rates for smoking attributed deaths from heart disease is increasing.



Hartlepool's rate of lung cancer registrations has been significantly higher than England for each of the last 11 years.



Hartlepool's smoking attributable hospital admissions have been significantly higher than England for the last five years.



Hartlepool's rate of mothers who smoke at the time of delivery of their baby has remained significantly worse than the England average throughout the last 12 years.



Health Inequalities and Smoking

Reducing health inequalities is a key priority and smoking is the single largest driver of health inequalities. Smoking is far more common among people with lower incomes. The more disadvantaged someone is, the more likely they are to smoke and to suffer from smoking-related disease and premature death. We also know that smoking rates are also higher among people with a mental health condition, people in contact with the criminal justice system, looked-after children, and LGBTQ+ people.

In the Index of Multiple Deprivation (IMD) 2019, Hartlepool has the 10th highest proportion of Lower Super Output Areas (LSOAs) in the most deprived 10% in England. This is the 2nd highest position in both the North East and the Tees Valley. Hartlepool is 10th nationally, for both the rank of average score and the rank of local concentration. Both of these are again the 2nd highest in the North East and 2nd highest in Tees.

Rank of Percentage of LA's LSOAs within most deprived 10% (out of 317 LAs)

	2010	2015	2019
Darlington	45	58	47
Hartlepool	10	10	10
Middlesbrough	1	1	1
Redcar & Cleveland	36	33	29
Stockton-on-Tees	57	47	39

(Source: TVCA)

Our vision

This strategy sets out our collective approach to reduce the prevalence of smoking and its effects on our communities. The vision and priorities were developed with partners and informed by the needs assessment.

Our collective vision is to “Work together across Hartlepool to keep our communities, children and young people free from smoking related harms. We will achieve this by:

- Working towards a smoke free Hartlepool
- Building strong partnerships through the Tobacco Alliance
- Reducing the prevalence rate of smoking and exposure to second hand smoke.
- Reducing health inequalities in the longer term by reducing the number of smoke related illnesses.
- And reducing access to illicit tobacco/vapes”

In order to deliver our vision we will use the Fresh local Tobacco Control Action Plan as a framework.



Strand 1: Building infrastructure, skills and capacity for local tobacco control delivery

We know:

- The evidence is clear that working at the level of the individual is not enough and that a whole systems approach, working with a range of partners to tackle the cross cutting nature of tobacco is needed
- That effective tobacco control work is reliant upon strength and capacity across the wider system, sharing successes of population based programmes and working collaboratively in a shared evidenced based approach to understand and tackle the harms caused by tobacco
- We need to understand the provision and impact of the current stop smoking support pathways.

We will:

- Deliver the priorities of the Tobacco Strategy and action plan through the Tobacco Alliance for Hartlepool with a focus on:
 - Reducing health inequalities caused by smoking and support vulnerable groups to be Smokefree
 - Protecting children and young people from tobacco and encourage Smokefree pregnancies
- Utilise the support of Fresh partnership website www.fresh-balance.co.uk in the development of the Alliance to ensure we have access to the latest tools and resources
- Use evidence based tool kits with Alliance partners to help with local planning and delivery of actions
- Share national, regional and local updates and develop opportunities to share knowledge and practice across systems in Hartlepool
- Use NICE guidance standards to assess standards of smoking cessation in community and secondary care services
- Audit smoking pathways, documentation and data across stakeholders, Alliance partners and communities
- Work with partners to enable them to complete CLeaR assessment tools relevant to their service areas, to include maternity, alcohol and drugs, illicit tobacco and mental health services to identify improvements for service delivery
- Work with partners to agree and implement a collaborative approach to enhance existing stop smoking support in particular the pathways for staff, in patients and mental health services, in line with the NHS Long Term Plan.

Priority 2: Advocacy for evidence based policies and legislation to achieve a Smokefree 2030 and to minimise influence of the tobacco industry

We know:

- For tobacco control, the priority is to ensure that the evidence base is followed and that policies are developed based on what works to reduce harm, free from any influence of the tobacco industry or their affiliates
- We need to build the understanding of the harm of tobacco to society and to the locality
- We need to build partners understanding around the role of commercial determinants of health and maximising opportunities for effective action around these linking with key partners
- We need to build upon progress to date by using the current evidence base to advocate for further tobacco policy measures including tightening of current legislation and also new regulation that will have a direct impact to reduce smoking prevalence and help to achieve the smoke free 2030 ambition.

We will:

- Utilise support from Fresh to work with Hartlepool Tobacco Alliance members to ensure there is an understanding of tobacco industry influences and how to avoid interference
- Ensure there is continued vigilance around the tobacco industry and frontline groups and that we adhere to Article 5.3 as set out within the framework Convention on Tobacco Control (FCTC)
- Include a focus on advocacy within the delivery plan
- Identify and share local case studies on action on tobacco and encourage the sharing of “real people” stories to bring to life the human side of tobacco control
- Identify and support locality champions to support the delivery of key tobacco advocacy priorities. We will ensure local engagement in the regional Making Smoking History Champions Forum facilitated by Fresh to highlight good practice and share learning
- Respond to national consultations across a range of Tobacco related topics, utilising support from Fresh for presentations and briefings to gain support on key advocacy issues both locally and nationally.

Priority 3: Reducing exposure to tobacco smoke and normalising smokefree environments

We know:

- A priority is to reduce indoor exposure to second-hand smoke
- Exposure to second-hand smoke has immediate health effects. It can reduce lung function; exacerbate respiratory problems; trigger asthma attacks; reduce coronary blood flow; irritate eyes; and cause headaches, coughs, sore throats, dizziness and nausea
- There is no safe level of exposure to tobacco smoke and there are long-term health effects, including heart disease and lung cancer, especially with continued exposure over time.

We will:

- Develop a locality strategic approach to reducing exposure to tobacco smoke and normalising smokefree environments using briefings and support from Fresh
- Deliver focussed sessions to Alliance members covering each strand of the strategy
- Share training resources and campaign materials on the dangers of second hand smoke with Hartlepool Tobacco Alliance for use by frontline staff to deliver standardised messages
- Work with partners to ensure workplace policies on smoking are up to date and they recognise Vaping as a means to help smokers quit
- Utilise the Better Health at Work Award (BHAWA) framework to ensure the effectiveness of their smoke free policies and share training resources on the dangers of second hand smoke
- Work with a range of local partners to commit to reducing exposure to tobacco smoke and normalising smoke free environments
- Develop a new plan for smoke free places – particularly around young people e.g. schools, parks, sports clubs, work places and housing providers.

Priority 4: Year round, media communications and education

We know:

- Year round media, communications and education is one of the key areas to continue to reduce smoking rates
- There is substantial evidence for the role of media campaigns and also year round media to increase effectiveness
- It is necessary to use different communication platforms to maximise reach and understanding of messages.

We will:

- Include communications as a key part of the Alliance utilising support from Fresh to inform the development of a coordinated local communication plan
- Organise themed discussions for locality partners, with support from Fresh to map and develop communication channels which will amplify regional campaigns by ensuring that toolkits are shared with partners and local messaging mirrors that of mass media campaigns
- Ensure the Fresh campaign website www.freshquit.co.uk to be included in all relevant public facing communications
- Provide clear guidance to professionals and public on the use of e-cigarettes/vapes including:
 - Use of e-cigarettes/vapes as an approved harm reduction technique for adults who are current smokers
 - The potential risk of continued nicotine addiction
 - Advice and information relating to the use of vapes in children and young people
- Provide topic specific training sessions for professionals
- Provide professionals across the locality system access to online training to support behaviour change from the National Centre for Smoking Cessation and Training (NCSCT). This includes core competencies required to support a quit attempt
- Deliver year round media and communications to help to motivate smokers to stop and also to stay stopped
- Ensure that key pieces of work, including locality media campaigns, are evaluated as appropriate and learnings are implemented to improve delivery in the future.

Priority 5: Supporting smokers to stop and stay stopped and also to reduce harm

We know:

- Hartlepool's prevalence of smoking for those aged 15 and above has fallen, following a similar pattern to the national decline in smoking. However, throughout this period Hartlepool has remained significantly worse than the England average and currently has the 8th highest smoking rate for those aged 15 and above in England, and the highest in the North East
- The biggest impact on reducing smoking prevalence is to increase the numbers of smokers who try to quit at population level
- That smoking is a chronic relapsing long term condition and it can take many attempts before quitting for good
- That there are many routes to quit and ensuring that smokers are given as many options as possible is important in order to increase successfully quitting
- E-cigs can support smokers to stop and vaping is less harmful than smoking but not risk free. Our approach will be to ensure that smokers get accurate messaging around vaping at the same time as work with key partners to reduce the uptake amongst non-smokers or children and young people.

We will:

- Develop services that target those most at risk and focus our support on priority groups not already supported by existing NHS pathways
 - Target work to support those with smoking related conditions particularly in relation to cancers, cardiovascular disease (CVD) and chronic obstructive pulmonary disease (COPD) as rates in Hartlepool have historically been worse than the England average
 - Work to continue the decline in the proportion of smokers in routine and manual occupations in Hartlepool
 - Work with colleagues delivering the maternity pathway to look at how we provide ongoing support to new mothers, partners and their families to ensure they are given continued support to stop and remain stopped following delivery
 - Develop a stop smoking offer for people who access substance misuse services
- Develop a vape offer for adults as part of the national pathfinder project and building on the work of the NHS pathways, targeting; primary care, 0-19 services, substance misuse services and mental health services amongst other groups
- Communicate the evidence base for vaping and help facilitate discussions and understanding around this with local partners using resources and support from Fresh
- Encourage all partners to adopt an evidence based approach to vaping and cascade approved resources aligned with regional position statement(s) and key messages.

Priority 6: Raise price and reduce illicit trade

We know:

- Increasing tobacco prices is the most effective policy to reduce smoking rates, reduce health inequalities and prevent smoking-related deaths
- Increasing tobacco prices significantly helps to reduce youth smoking
- The availability of illicit tobacco undermines almost every aspect of tobacco control policy keeping smokers hooked and providing a cheap and accessible source of tobacco to children
- While we recognise that vapes play an important role in tobacco control and that they are highly effective quitting aid, we are clear in our focus on the need to stop young people from vaping.

We will:

- Develop an illicit tobacco plan with partners to coordinate action using the 8 key strand for addressing illicit tobacco (enforcement of underage sales, illicit tobacco) <http://www.illicit-tobacco.co.uk/strategic-framework/index.html>
- Use local data to target activity in geographical areas as well as population groups, e.g. using data to target illicit tobacco supply, illegal tobacco sales and high smoking prevalence
- Provide support to trading standards colleagues' in partnership with Fresh to inform their approaches to addressing illicit trade
- Deliver a dedicated themed session for the Alliance around illicit tobacco use
- Support the work of Fresh and ASH to recommend that Government toughen vape regulation.

Priority 7: Tobacco and nicotine regulation including reducing tobacco promotion

We know:

- Tobacco regulation exists to protect people from harm by reducing the availability, accessibility and attractiveness of tobacco products
- The UK has comprehensive legislation in place which offers good levels of protection but there is much more to be done to ensure this protection remains effective and contributes to a decline in smoking rates
- The focus must be on ensuring effective regulation on tobacco whilst ensuring that other nicotine products are appropriately regulated to protect young people whilst supporting smokers to quit
- Tobacco companies promote their products and services in ways that are sometimes difficult to recognise e.g. through third parties organising events.

We will:

- Work with Licensing/Trading Standards to ensure ongoing compliance monitoring around all tobacco regulations as well as age of sale, proxy purchasing and point of sale displays
- Share compliance monitoring data, outlining trends and risks and maintain effective links with regulatory colleagues, providing advice and guidance to partners and working collaboratively to share best practice
- Ensure local attendance of public health and regulatory representatives to the six monthly online Fresh Tobacco Crime and Regulation Forum meetings where regulatory issues are discussed and best practice shared
- Alert Trading Standards and Fresh if situations arise where involvement of tobacco companies maybe suspected.

Priority 8: Data research and public opinion

We know:

- Data research and public opinion is important in order to track local progress, identify key priority groups for focussed action, and also to help to advocate for evidence based policies
- There is a range of data that can be tracked locally and can be used as a useful comparison to inform the work of the Alliance and support the development of stop smoking support.

We will:

- Use clearly defined data to ensure we are using targeted approaches to address health inequalities
- Incorporate clear success measures into the Alliance action plan to assess progress against the priorities within this strategy
- Use qualitative insight work led by Fresh on attitudes towards tobacco, with a particular focus on exploring motivations for behaviour change, to inform local campaign development. This will also include understanding the needs of people who smoke and routes and barriers to quitting
- Utilise findings from public opinion surveys, which monitor behaviours, attitudes, policy support linked to tobacco
- Work with Fresh to share key pieces of research on a broad range of topics with local partner's and also work collaboratively with key academics on the evaluation of the delivery of stop smoking support
- Work with education and youth service colleagues to better understand the numbers of young people who smoke/vape to inform approaches and interventions using evidenced based approaches and resources
- Use data and evidence to implement effective interventions to reduce the numbers of young people taking up smoking/vaping.

Delivering the Strategy and Monitoring Impact

Local:

This strategy will be delivered through the Hartlepool Tobacco Alliance facilitated by Public Health. The partners of the Alliance will work to develop and deliver the action plan working to integrate work into local delivery plans and cross referenced with regional tobacco delivery plans.

We will ensure this strategy and action plan includes success measures which will be monitored and delivered through the Alliance and share achievements with partners at quarterly Alliance meetings and present progress to the Health and Wellbeing Board.

Regional/National:

The Alliance will work with the Office for Health Improvement and Disparities (OHID) to share learning and best practice and attend regional tobacco control network meetings. We will work with OHID to support our delivery of the Vape pilot and share learning to inform the national Swop to Stop pathfinder programme.

Hartlepool Tobacco Alliance will utilise support from Fresh to refresh their approach to reduce smoking rates and tackle health inequalities. Key areas of focus are set out in the strategy and will include media campaigns, local strategy planning, advocacy, communications and sharing of evidence based approaches to inform practice.

Partnership Working

Hartlepool Tobacco Alliance is the local partnership working to reduce smoking rates and tackle health inequalities. In Hartlepool the Alliance has been refreshed in order to facilitate the development of a local needs assessment and the development of this strategy and priorities. All partners will be accountable for ensuring the delivery of priorities outlined in this strategy to reduce smoking rates and tackling health inequalities across Hartlepool. Partners include:

Office of Health inequalities and Disparities (OHID)

Education settings

Health watch

0-19 services

Community Navigator Teams

Fresh

Voluntary and Community Sector (VCS)

START Substance Misuse Service

Primary Care Networks (PCNs)

Adults and Children's social care teams

Adults and Children's safeguarding

Cleveland Police

Cleveland Fire Brigade

Neighbourhood Safety Teams

North Tees and Hartlepool NHS Foundation Trust

Tees Esk and Wear Valley Mental Health Services (TEWV)

Public Protection and Licencing

Housing Support Teams

Pharmacies

Hartlepool and Stockton Health (H&SH)

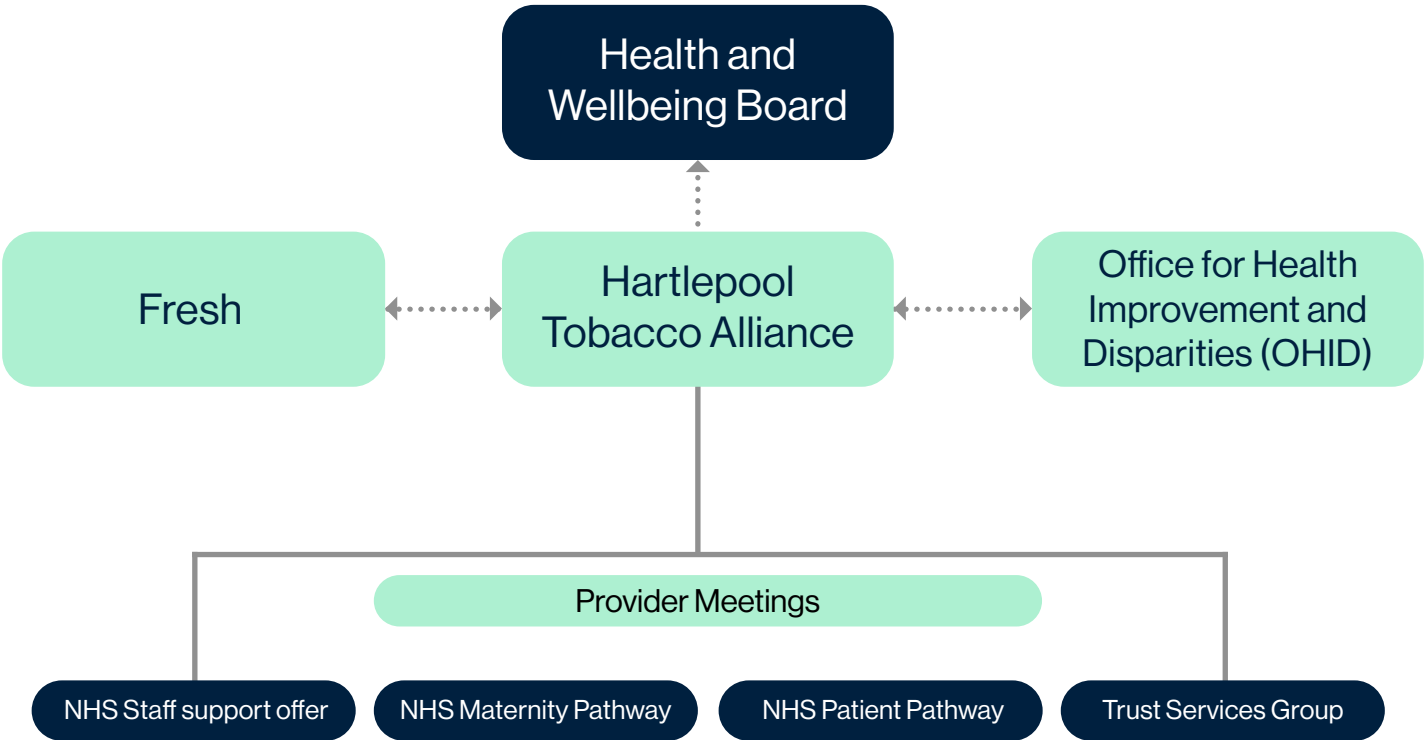
Commissioning Support

Lived Experience / patient experience Groups

Public Health

Tobacco Control Governance Structure

The Hartlepool Tobacco Alliance will oversee the delivery of the action plan as set out below.



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1. <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>
2. <https://www.gov.uk/government/publications/the-khan-review-making-smoking-obsolete>
3. <https://www.longtermplan.nhs.uk/online-version/>
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5. <https://www.nice.org.uk/guidance>
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8. <http://www.who.int/fctc/en/>

Smoking Needs Assessment 2023

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1.0 Introduction

Smoking is one of the biggest causes of death and illness in the UK. There are still 7.3 million adult smokers in England and every year around 78,000 people in the England die from smoking, with many more living with debilitating smoking-related illnesses. Smoking increases your risk of developing more than 50 serious health conditions.

But whilst nationally there has been great progress to reduce smoking prevalence and smoking rates among young people and pregnant women have dramatically reduced, 8% of 15 year olds still smoke, risking a lifetime of ill health. Over 10% of pregnant women still smoke, with all the attendant risks of miscarriage, premature birth, still birth and neonatal complications.¹ Smoking in the home not only damages the health of children but increases their chance of becoming smokers 4-fold.²

Hartlepool's prevalence of smoking for those aged 15 and above has fallen from 23.9% in 2013/14 to 19.7% in 2020/21. Throughout this period Hartlepool has remained significantly worse than the England average, but has followed a similar pattern in its decreasing rate. In 2020/21 Hartlepool had the 8th highest smoking rate for those aged 15 and above in England, and the highest in the North East.

The cost of smoking to society

Of this cost the national strategy 'Towards a smoke-free generation: tobacco control plan for England' identified that smoking causes around 79,000 preventable deaths in England and is estimated to cost our economy in excess of £11 billion per year.

- £2.5 costs attributed to the NHS
- £5.3 billion attributed to employers through absence from work

Smoking-related ill health also leads to increased costs for the adult social care one study estimates that local councils face a demand pressure of £760 million a year on domiciliary (home) care services, as a result of smoking-related health conditions.³

Additional costs associated with smoking contributed to smoking include: related fires and tobacco litter, as well as the wider costs associated with illicit tobacco and organised crime.

Smoking remains an addiction which is largely taken up in childhood, with the majority of smokers starting as teenagers. 77% of smokers aged 16 to 24 in 2014 began smoking before the age of 18.⁴ As a result many young people become addicted before they fully understand the health risks associated with smoking.

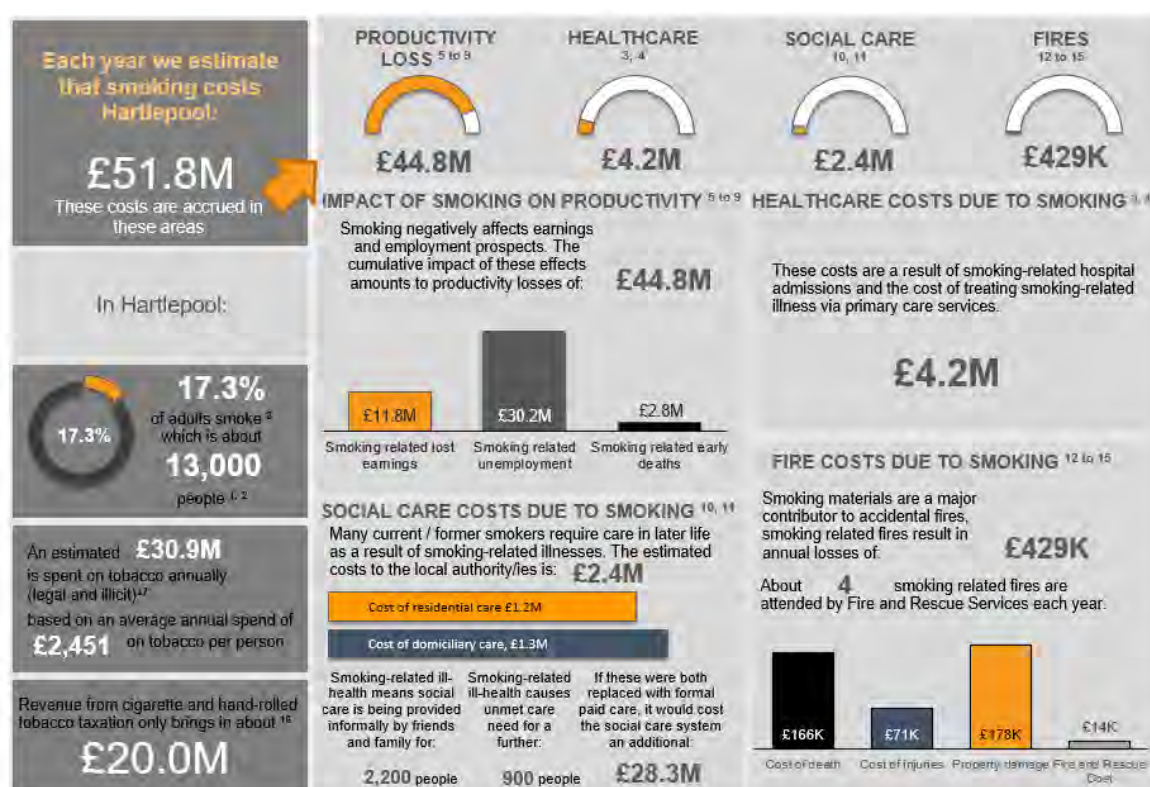
A new economic analysis of national data for **ASH**⁵ in January 2023 found that the cost of smoking to society is significantly higher than previous estimates have shown. Commissioned by charity Action on Smoking and Health (ASH) the new

figures published showed the cost of smoking to society totals £17.04bn for England each year. This compares to £12.5bn under the previous estimate.

The higher estimate is a result of a new assessment of the impact of smoking on productivity. Smokers are more likely than non-smokers to become ill while of working age increasing the likelihood of being out of work and reducing the average wages of smokers. Smokers are also more likely to die while they are still of working age creating a further loss to the economy. Together this adds up to £13.2bn.

Smokers' need for health and social care at a younger age than non-smokers also creates costs, with smoking costing the NHS an additional £2.4bn and a further £1.2bn in social care costs. This includes the cost of care provided in the home and, for the first time, residential care costs. However, many of smokers' care needs are met informally by friends and family. It's estimated that to provide paid-for care to meet needs would cost society a further £14bn, this is not included in the overall £17bn figure but illustrates the wider burden of smoking beyond pounds and pence.

The costs of smoking in Hartlepool



Area Name	Hartlepool
Smoking Statistics	
Smoking Prevalence % ⁽¹⁾	17.3%
Number of smokers ⁽¹⁾	13,000
Estimated average spend per smoker (legal and illicit) ^(7,11)	£2,451
Total costs due to smoking	£51.8M
Productivity costs ⁽⁵⁾	£44.8M
Smoking related lost earnings	£11.8M
Smoking related unemployment	£30.2M
Smoking related early deaths	£2.8M
Healthcare costs	£4.2M
Social care costs ⁽⁷⁾	£2.4M
Cost of domiciliary care	£1.3M
Cost of residential care ⁽⁷⁾	£1.2M
Additional people receiving informal care needed due to smoking	2,200
Additional people with unmet care needs due to smoking	900
Estimated cost of formalising both of the above	£28.3M
Fire costs ^(8, 9, 10)	£429K
Approximate number of smoking attributable fires	4
Cost of deaths due to smoking attributable fires	£166K
Cost of injuries due to smoking attributable fires ^(8, 9, 10)	£71K

Cost of property damage due to smoking attributable fires ^(8, 9, 10)	£178K
Annual cost to fire and rescue services due to smoking attributable fires ^(8, 9, 10)	£14K
Estimated revenue from smoking taxation	£20.0M

The cost of smoking in Hartlepool. Source Fresh North East

The impact of COVID on smoking

Smoking damages the lungs and the immune system, increasing the incidence, duration and /or severity of respiratory infections caused by numerous types of viruses and bacteria. A review by the World Health Organisation stated that smoking is associated with more severe illnesses and an increased risk of death in people who need hospital treatment for COVID-19.⁶

A UK study published in January 2021 suggested that smokers who get COVID are twice as likely to attend hospital and tend to report more symptoms than non-smokers⁷. The analysis, by Imperial College London, Kings College London and ZOE (the health symptom tracking app) looked at data from 2.4million people in the UK who self-reported symptoms and test results.

Building on this, in September 2021 a study in BMJ Thorax suggested that even light smokers (Smoke less than 9 cigarettes per day) are twice as likely to die from COVID-19. The study drew on primary care records, COVID -19 test results, hospital admission data and death certificates. Compared with non-smokers, non-smokers were 80% more likely to be admitted into hospital and significantly more likely to die.⁸

There is limited data on the impact of COVID -19 on smokers, however evidence has highlighted the negative impact of tobacco use on lung health and its causal association with a plethora of respiratory diseases, making smokers more vulnerable to infectious diseases.⁹

Use of e-cigarettes in young people

A survey of responses from the ASH Smokefree GB survey of 11-18 year olds 2013-2022, in the context of changes in tobacco use and the regulation of e-cigarettes.¹⁰ The survey headlines showed:

Use and awareness of e-cigarettes

- A large majority of 11-17 year olds have never tried or are unaware of e-cigarettes (83.8%).
- In 2022, 15.8% of 11-17 year olds had tried vaping, compared to 11.2% in 2021 and 13.9% in 2020.

- In 2022, 7.0% of 11-17 year olds were current users, compared to 3.3% in 2021 and 4.1% in 2020.
- Children under 16 are least likely to try e-cigarettes. 10.4% of 11-15 year olds have tried vaping, compared to 29.1% of 16-17 year olds. Among 18 year olds 40.8% report having tried an e-cigarette.
- Use among 11-17 year olds who have never smoked remains low and largely experimental, while 7.5% of never smokers have tried an e-cigarette in 2022 only 1.7% report at least monthly use.

Attitudes towards vaping

- Reasons for using e-cigarettes differ between children who smoke and those who haven't. While children who haven't smoked are significantly more likely to report their main reason for using one was 'just to give it a try' (65.4%) among those who smoke they are significantly more likely to report that they 'enjoy the experience' (17.5%) are 'trying to quit smoking' (10.7%) or are 'addicted to them' (10.3%).
- The misperception that e-cigarettes are more than or equally harmful as tobacco cigarettes rose from 2013 onwards and in 2022 was 40.9%, the same as in 2020. Only 42.1% of 11-17 year olds in 2022 believed that e-cigarettes were less harmful than cigarettes.

Main source and type of product used

- In 2022 for the first time the most frequently used product was a disposable vape (52.0% compared to 7.7% in 2021), with the most popular brands by far being Elf Bar and Geek Bar.
- The main source for both cigarettes and e-cigarettes is shops. 51.9% of 11-17 year olds get their cigarettes from shops and 46.5% get their e-cigarettes from shops.

In conclusion, use of e-cigarettes has increased in 2022 compared to 2021. However, use among never smokers remains low and mostly experimental. Likelihood of trying or currently using e-cigarettes increases with age and smoking status. The big increase in the use of disposable products has happened concurrently with higher levels of youth use, although the survey is cross sectional and so does not prove this is causal in either direction. Continued surveillance is needed.

2.0 Purpose/Aim of the needs assessment

- Collate data and intelligence to understand the smoking population and the inequalities that exist
- Develop recommendations which will aid the development of the Hartlepool Tobacco Control Strategy
- Prioritise resource allocation for smoking cessation to ensure maximised outcomes in populations most at need

- Inform the public health evidence base for services and interventions to reduce smoking related harm

3.0 Methodology

This Needs Assessment is based on a range of desk research and data analysis. The main focus is to provide a baseline and understand any changes over the last five years. This needs assessment aims to further understand the needs of the population of Hartlepool in relation to smoking and to inform a partnership approach to addressing smoking rates and the development of a Tobacco Control strategy.

The core data used to support this needs assessment is sourced from the Public Health Outcomes Framework (PHOF) indicators.

Additional partnership data was gathered and analysed supporting the findings of this assessment, which include:

- Secondary care service data
- Licensing and Trading Standards data
- Data from commissioned services

4.0 National and local policy

4.1 National

Department of Health ‘Towards a smoke-free generation: tobacco control plan for England’¹¹ In 2017 the Government set an objective for England to be Smoke free by 2030 meaning only 5% of the population would smoke by then. To provide access to stop smoking support for all with four ambitions

1. A smoke free pregnancy for all
2. Parity of esteem for those with mental health conditions
3. Backing evidence based innovations to support quitting
4. Backing evidence based innovations to support quitting

The Khan review: making smoking obsolete¹²

The Khan review (9 June 2022) found that England would miss the national target of 5% by at least 7 years with the poorest areas not meeting it until 2044. To have any change of hitting the smokefree target, nationally there is a need to accelerate the rate of decline. The review looked at best international evidence and current national policies and concluded that 15 national recommendations were required.

NHS long term plan¹³ sets out new commitments to address the causes of ill health with more focus on prevention and a more systematic approach in addressing health inequalities and contribute to the government's ambition of five years of extra healthy life expectancy by 2035. The document sets out plans to target in relation to cutting smoking in pregnancy and people with long term mental health problems. Additionally through the NHS Long Term Plan commitment support is given to the NHS to ensure that every person admitted to hospital (both physical and mental health sites) who smokes will be offered NHS-funded tobacco dependency treatment by 2023/24. This includes all expectant mothers throughout their antenatal care.

4.2 Local

Hartlepool Joint Health and Wellbeing Strategy 2018-2025¹⁴ states that Hartlepool Health and Wellbeing Board is committed to working together with the people of Hartlepool to improve the health and wellbeing of residents and will provide and enable environments that support people to take up and sustain a healthy lifestyle.

North East and North Cumbria ICP Better Health and Wellbeing for All an integrated care strategy¹⁵ sets out The better health and wellbeing for all plan sets out how we will reduce inequalities, improve experiences of our health and care services and improve the health and wellbeing of people living and working in our region by 2030 and beyond.

Director of Public Health Annual Report 2022¹⁶ noted in Hartlepool, more mothers smoke when their baby is born (14 in every one hundred mothers) and there are lower levels of breastfeeding (25 in every one hundred children at 6-8 weeks) than in the rest of England.

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**.

Hartlepool Borough Council Plan 2021/22 – 2023/24¹⁷ sets out a vision to for Hartlepool to be a place where people are enabled to live healthy, independent and prosperous lives. In particular the plan makes reference to:

- There are reduced levels of smoking, substance and alcohol misuse in the community;
- There is improved mental, emotional and social wellbeing;

5.0 Data

5.1 Hartlepool demographics

Hartlepool has a working aged population of 58% of the total population.

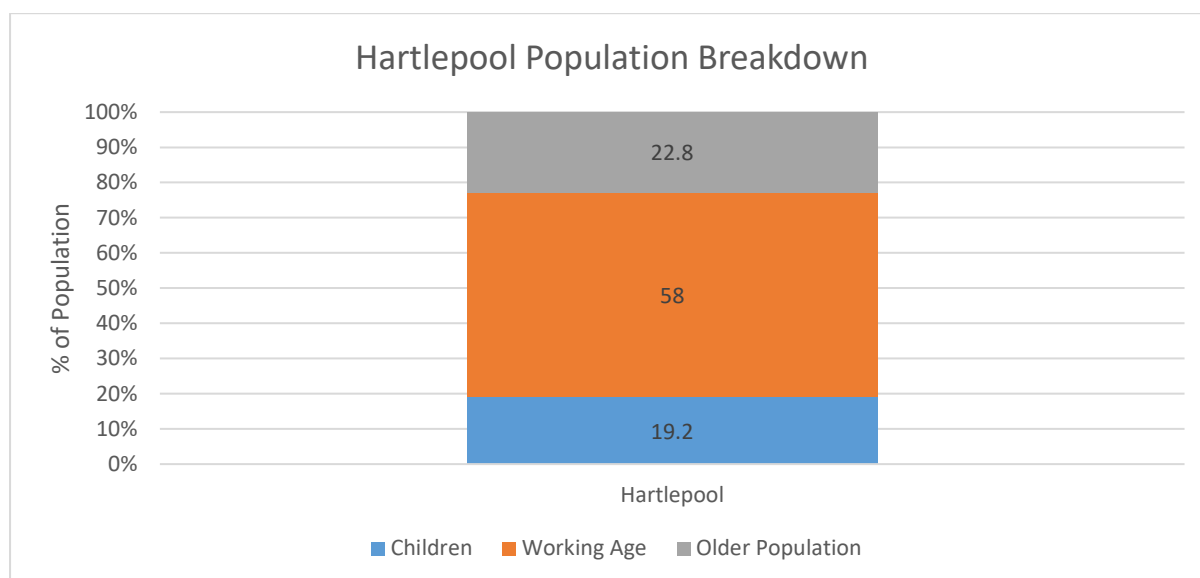


Figure 1: Hartlepool population breakdown

Source: ONS 2022 – 2020 Estimate

The remaining population is split with a slightly larger older population, 22.8% to 19.2% for children.

Within the individual wards in Hartlepool, Victoria has the largest proportion of working aged population, 63%, and Fens & Greatham the smallest, 51.1%.

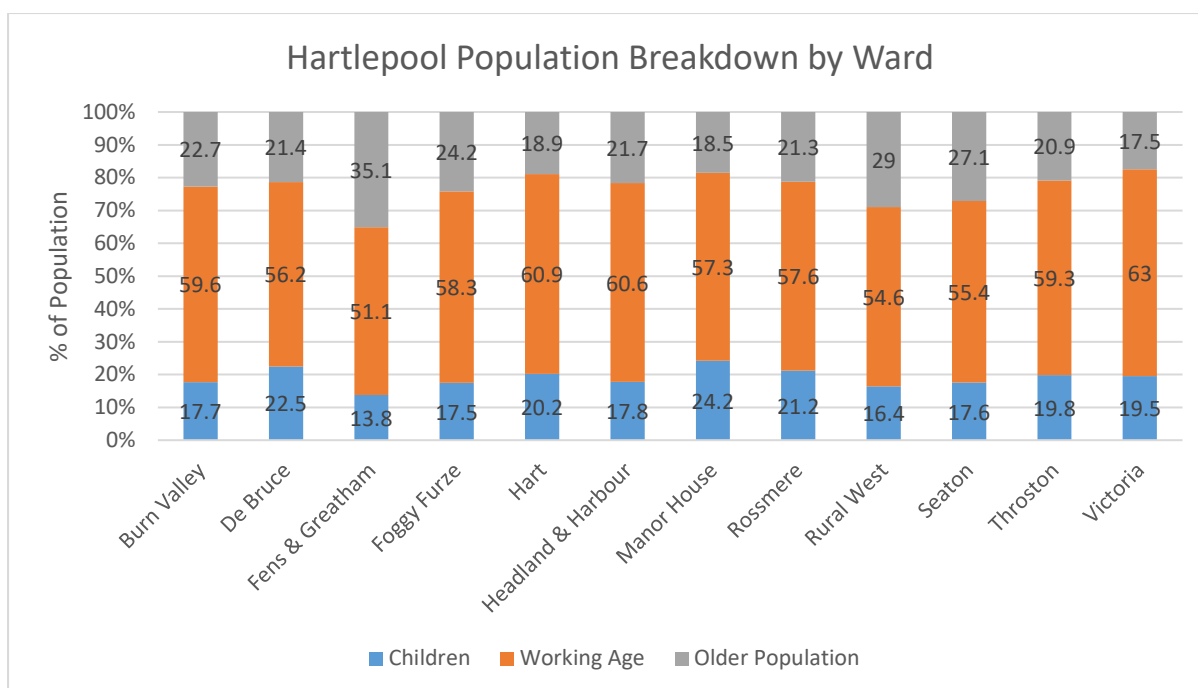


Figure 2: Hartlepool Population Breakdown by Ward
Source: ONS 2022 – 2020 Estimate

For the older population these two wards are reversed, with Fens & Greatham having the largest proportion, 35.1%, and Victoria the smallest, 17.5%.

Hartlepool's population is 51% female and 49% male in the latest population estimate.

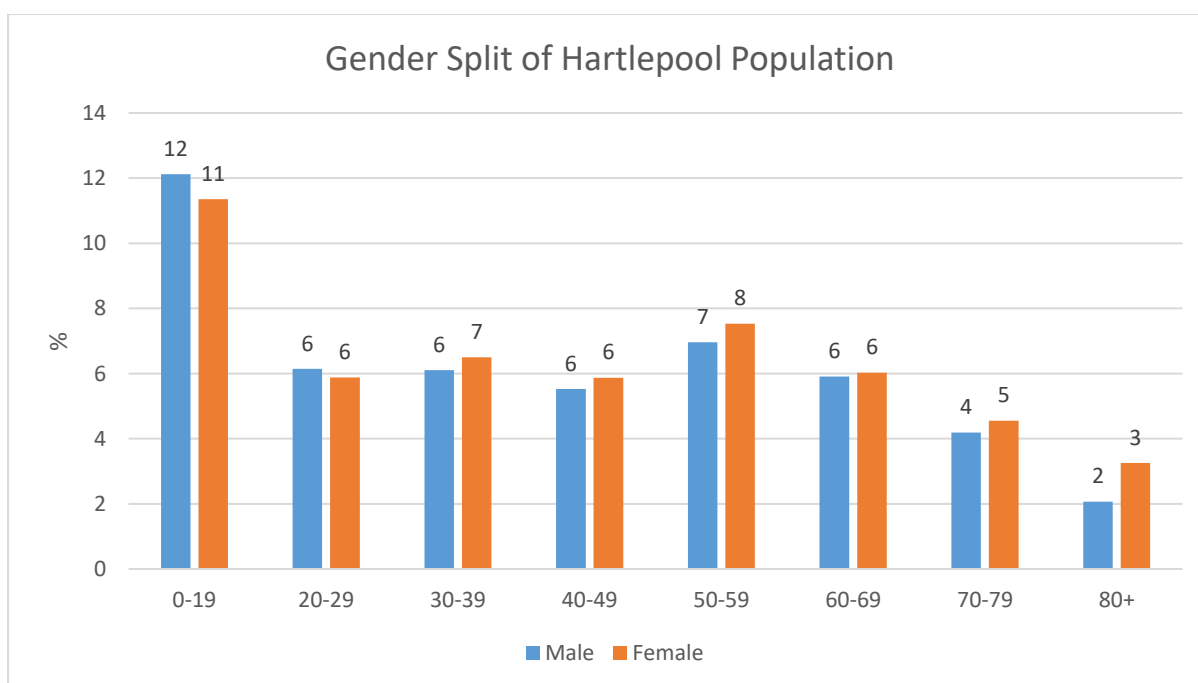


Figure 3: Gender Split of Hartlepool Population
Source: ONS 2022 – 2020 Estimate

The proportion for each gender is with 1% of each other for every age group.

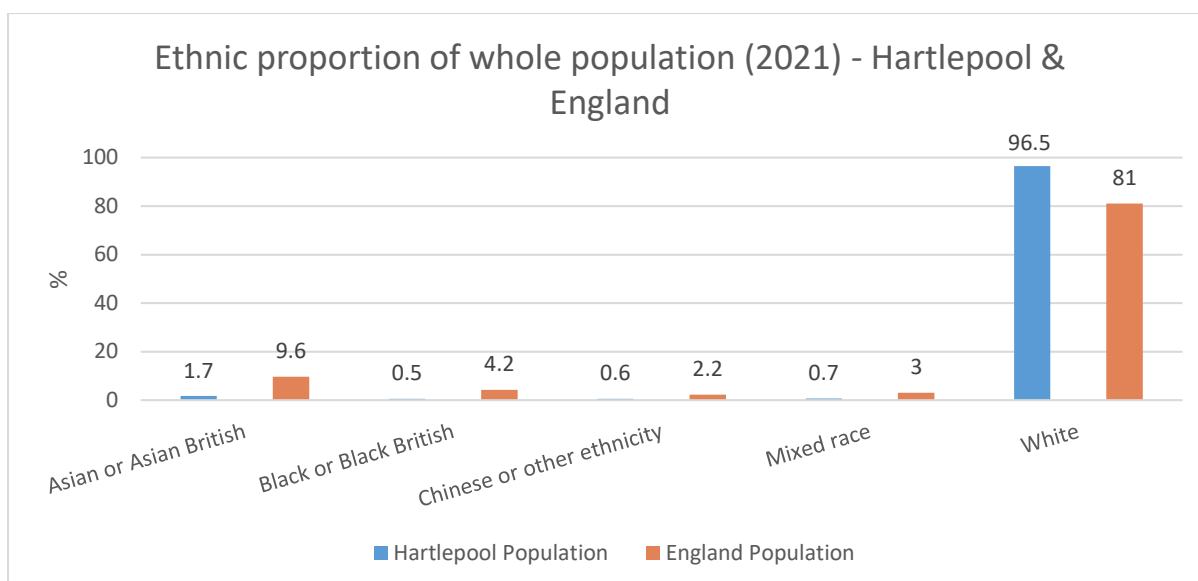


Figure 4: Ethnic proportion of whole population (2021) – Hartlepool & England.

Source: Census 2021

Hartlepool's population identifies as white to a very large majority. Of the 3.5% of Hartlepool's population who don't identify as white, almost half identify as Asian or Asian British, with no other ethnicity accounting for even 1% of the Hartlepool population. This is in contrast to the England population as a whole, where each of the non-white ethnic categories, Asian and Asian British, Black or Black British, Chinese or other ethnicity, and mixed race, account for at least 2.2%, and up to 9.6% for Asian and Asian British.

Hartlepool has almost 50% (49.3%) of its population employed in some form, full time, part time or self-employed.

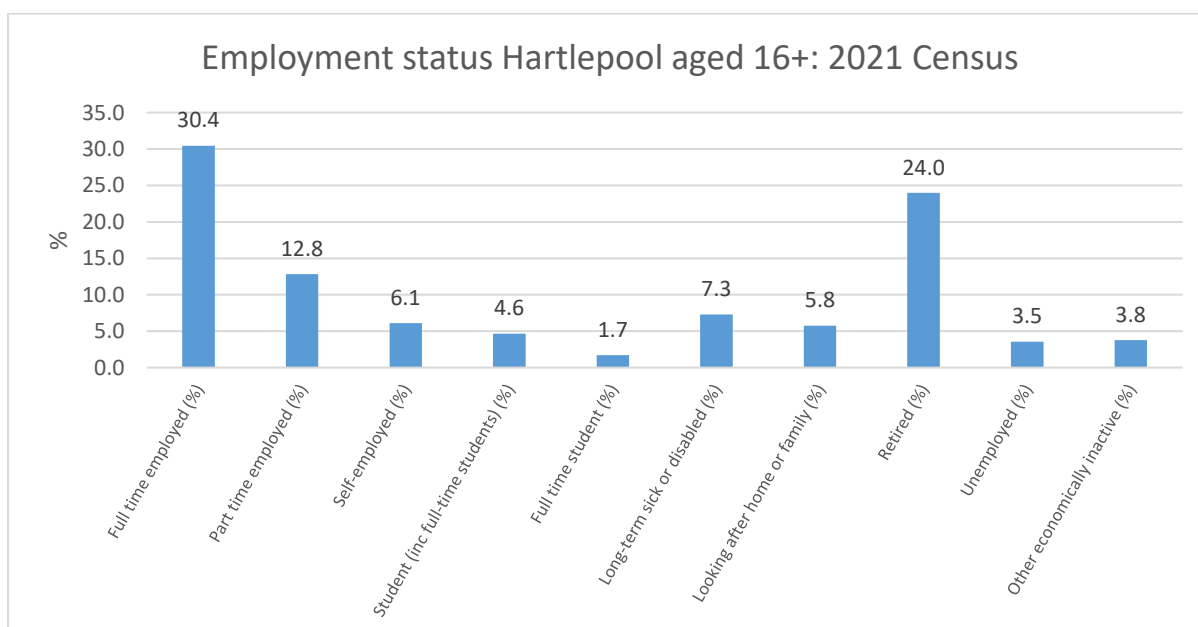


Figure 5: Employment status for Hartlepool aged 16 +: 2021 Census

Source: Census 2021

Almost a quarter of the population (24%) are retired, and almost 1 in 13 people (7.3) are long term sick or disabled. Unemployment and economic inactivity accounts for 7.2% of the population, which is again roughly 1 in 13 people.

5.2 Smoking prevalence (Adults)

Data from the Quality Outcomes Framework (QOF) shows that smoking rates within the population in Hartlepool have decreased year on year for the last seven years, and has done so at a similar rate to the England average.

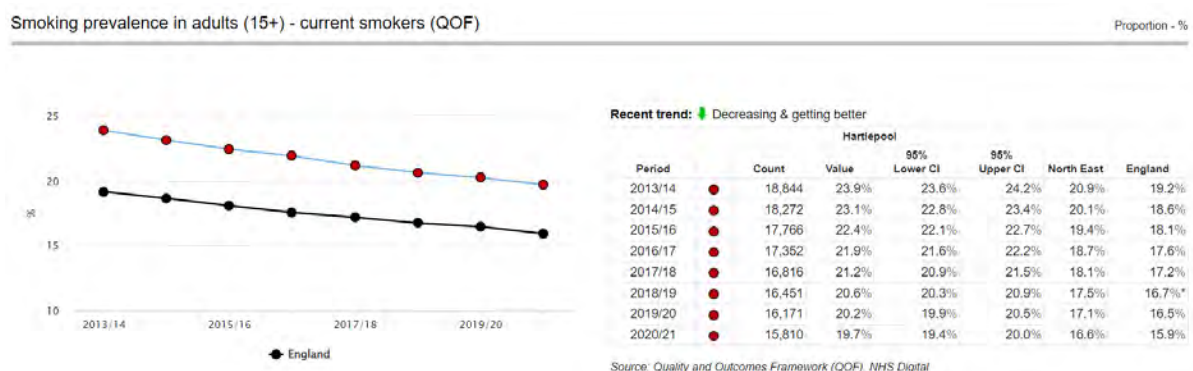


Figure 6: Smoking prevalence in adults (15+) – current smokers (QOF)

Source: QOF 2022

Hartlepool's prevalence of smoking for those aged 15 and above has fallen from 23.9% in 2013/14 to 19.7% in 2020/21. Throughout this period Hartlepool has remained significantly worse than the England average, but has followed a similar pattern in its decreasing rate. In 2020/21 Hartlepool had the 8th highest smoking rate for those aged 15 and above in England, and the highest in the North East.

However data from the 2020/21 GP Patient Survey (GPPS) and the 2021 Annual Population Survey (APS), looks at the smoking population for those aged 18+. These two surveys however show different pictures to each other.

The 2021 APS has Hartlepool with an 18+ smoking rate of 17.3%, which places Hartlepool as the 2nd highest rate in the north east and the 11th highest in England.

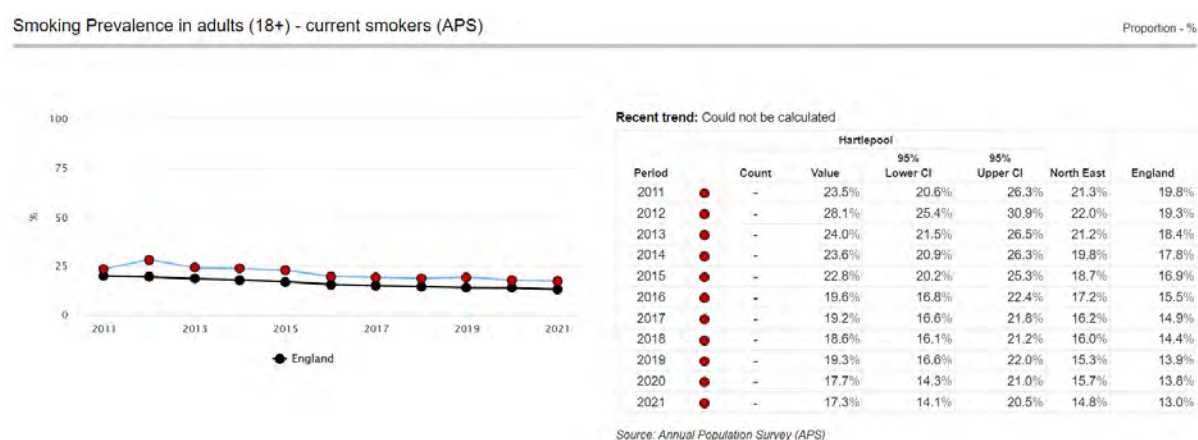


Figure 7: Smoking Prevalence in adults (18+) – current smokers (APS)

Source: APS 2022

This is similar to the QOF findings, and both show the England and Hartlepool rates reducing in a similar way across the reporting period, although the APS data has Hartlepool roughly a third higher than the England rate, compared with roughly a fifth for the QOF data.

However the 2020/21 GPPS data shows that Hartlepool has closed the gap with England, and has the same prevalence rate in 2020/21. The GPPS data also shows Hartlepool as having a rate of 14.4%, which places Hartlepool in the top performing 50% of local authorities. This is in somewhat of a contrast to the QOF and APS findings.

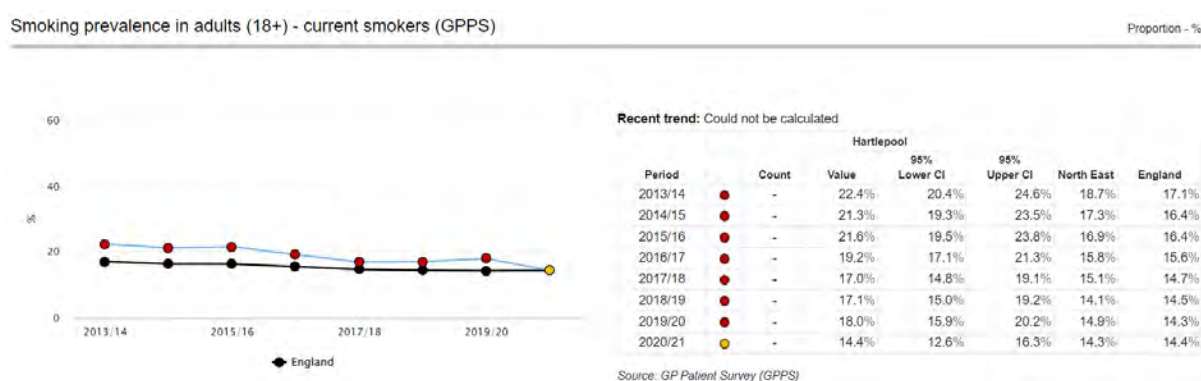


Figure 8: Smoking prevalence adults (18+) –current smokers (GPPS)

Source: GPPS 2021

Both the GPPS and the APS split the population into current smokers, ex-smokers and never smoked. If current and ex-smokers are combined, this gives the population who have smoked at any point in their life, and there are to some degree susceptible to the negative health outcomes related to smoking.

While the GPPS for Hartlepool had the smaller proportion of current smokers, it had a larger proportion of ex-smokers, to give a larger overall combined current or historic smoking population.

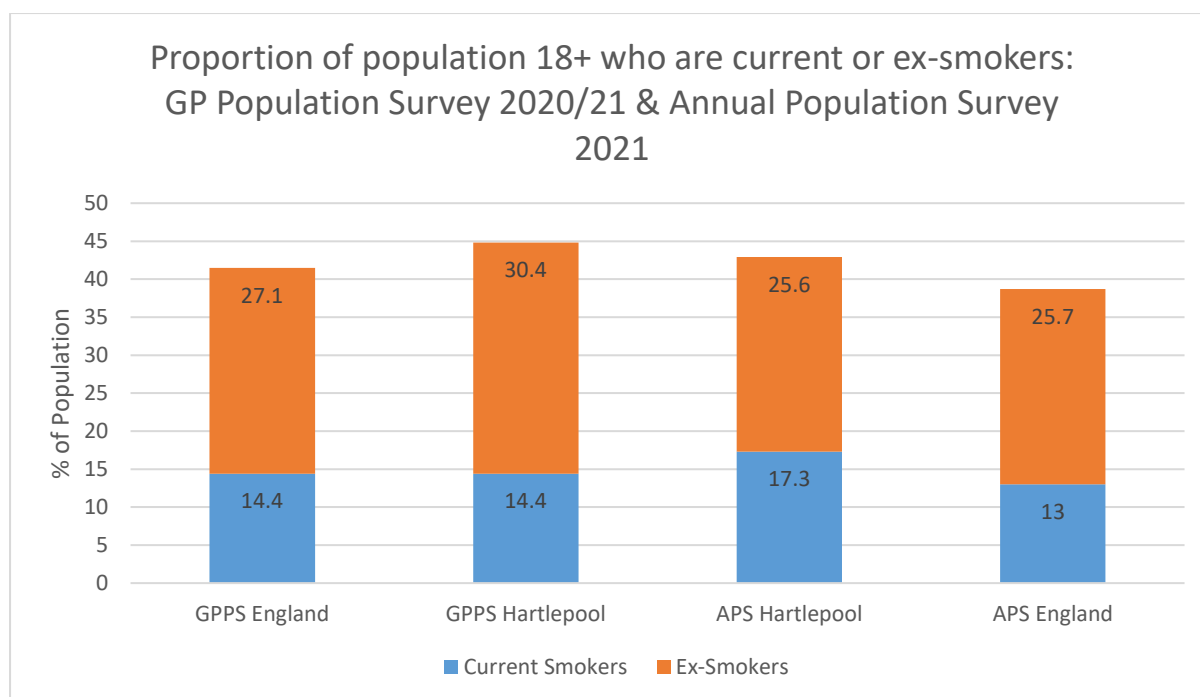


Figure 9: Proportion of population 18+ who are current smokers or ex- smokers: GP Population Survey 2020/21 & annual population survey 2021.

Source: GPPS 2021 & APS 2021

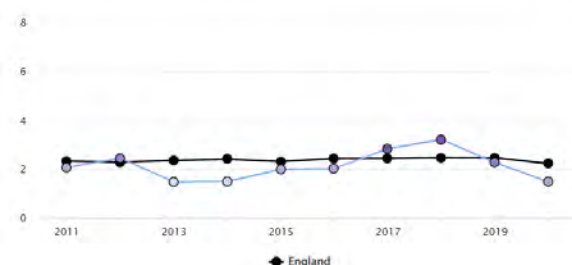
The differences in the figures between the GPPS and the APS highlight the difficulties in finding a consensus on smoking numbers within an authority population. The survey numbers are self-reported and the QOF figure relies on accurate information being maintained by an individual's GP practice.

One of the main targets in the government's tobacco control plan of July 2017 is to "reduce the inequality gap in smoking prevalence, between those in routine and manual occupations and the general population"¹⁸ For Hartlepool those in routine and manual occupations are almost 1.5 times more likely to smoke than those employed in other occupations. This figure has fallen for each of the last two years.

Odds of current smoking (self-reported) among adults aged 18-64 with a routine and manual occupation (APS)

Ratio

Quintiles: Best (●) (●) (●) (●) Worst (○) Not applicable



Recent trend: Could not be calculated

Hartlepool						
Period	Count	Value	95% Lower CI	95% Upper CI	North East	England
2011	-	2.06	1.48	2.86	2.38	2.32
2012	-	2.44	1.77	3.37	2.66	2.27
2013	-	1.48	1.07	2.03	2.18	2.35
2014	-	1.49	1.09	2.04	2.35	2.40
2015	-	1.99	1.45	2.72	2.47	2.31
2016	-	2.02	1.34	3.04	2.53	2.43
2017	-	2.84	1.90	4.23	2.65	2.44
2018	-	3.21	2.09	4.93	2.91	2.47
2019	-	2.26	1.52	3.36	2.56	2.46
2020	-	1.48	0.95	2.30	2.11	2.22

Source: Annual Population Survey (ONS)

Figure 10: Odds of current smoking (self-reported) among adults aged 18-64 with a routine and manual occupation (APS)
Source: APS 2021

However this is below the England average, though not to a degree that is statistically significant, and the 3rd best figure in the north east. The proportion in

Hartlepool of those in routine and manual occupations who are current smokers has declined at an almost identical rate to England over the last nine years, and has remained statistically similar to the England rate throughout this period.

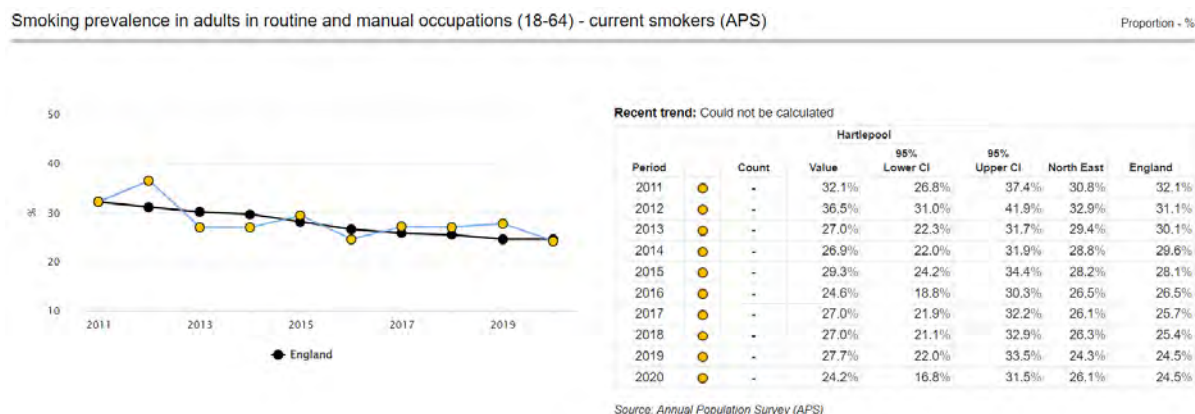


Figure 11: Smoking prevalence in adults in routine and manual occupations (18-64) - current smokers (APS)
Source: APS 2021

Hartlepool's rate in 2020 is the fifth best in the north east.

5.3 Smoking related conditions (Adults)

Looking more specifically at smoking related health conditions, Hartlepool has consistently been significantly worse than the England average for lung cancer registration for the last 11 years of reporting.

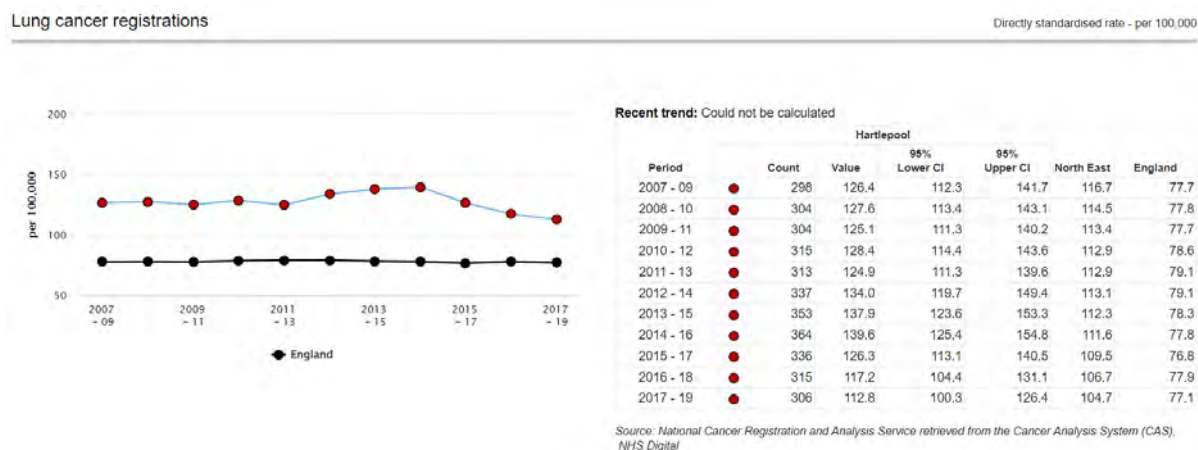


Figure 12: Lung cancer registrations
Source: National Cancer Registration and Analysis Service retrieved from the Cancer Analysis System (CAS), NHS Digital 2022

However the gap between Hartlepool and England in 2017/19 is closer than at any point in the 11 year reporting period. Hartlepool's 2017/19 rate of 112.8 is 46% higher than the England average, however in 2007/08 there was a 68% difference, and in 2014/15 the difference peaked at 79%.

Registrations for oesophageal cancer in Hartlepool have fluctuated much more than the England average over the 11 year reporting period.

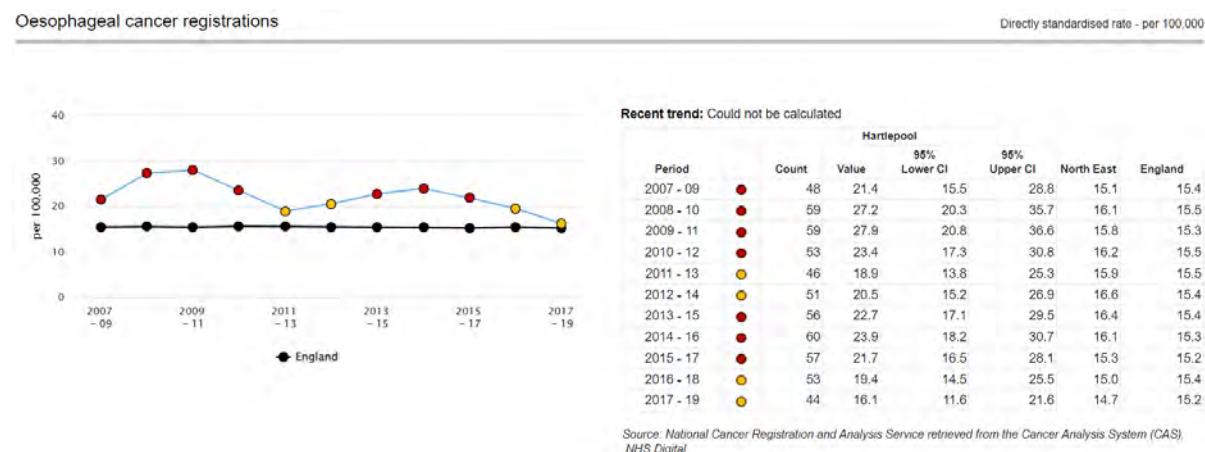


Figure 13: Oesophageal cancer registrations

Source: National Cancer Registration and Analysis Service retrieved from the Cancer Analysis System (CAS), NHS Digital 2022

In 2017/19 Hartlepool was similar to the England average, 16.1 registrations per 100,000 population compared with England's 15.2 per 100,000. This is a result of three consecutive years of declining rate for Hartlepool. Across the 11 years, Hartlepool's rate increased from 21.4 per 100,000 in 2007/08 to a peak of 27.9 in 2009/11 and is currently at the lowest rate of the reporting period, a range of 13.8, compared with England which has seen a range of just 0.3 across the 11 years of reporting.

Unlike both lung and oesophageal cancer registrations, oral cancer registration has followed a similar pattern to the England average across the reporting period.

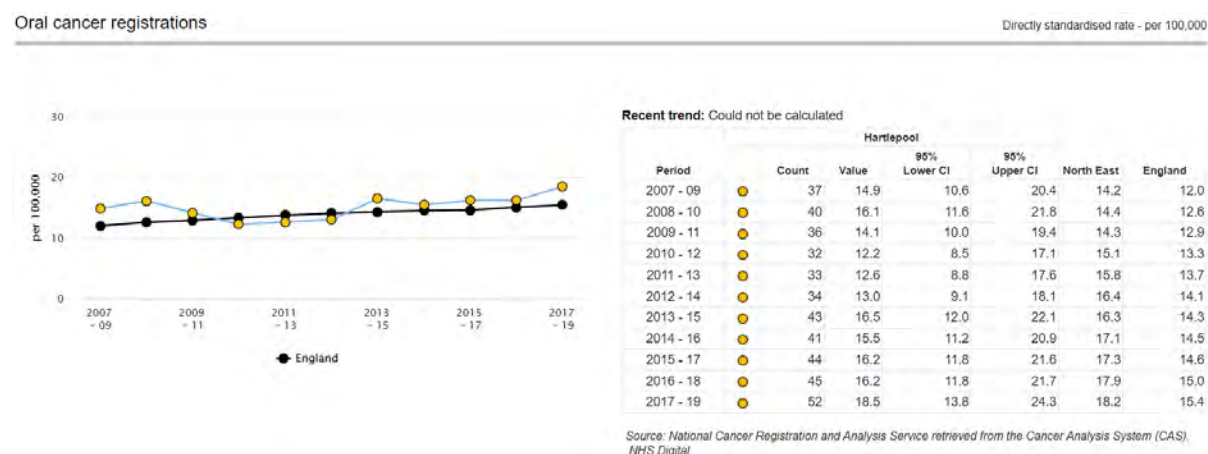


Figure 14: Oral cancer registrations

Source: National Cancer Registration and Analysis Service retrieved from the Cancer Analysis System (CAS), NHS Digital 2022

Hartlepool's oral cancer registration rate has remained similar to the England average throughout the 11 year reporting period, though Hartlepool's rate has increased from 14.9 per 100,000 population in 2007/09 to 18.5 per 100,000 in 2017/19. This amounts to an increase of 24%, which is again comparable to the England average of 28% in the same period.

Emergency hospital admission for COPD in Hartlepool have been significantly higher than the England average for the last 10 years of reporting.

Emergency hospital admissions for COPD

Directly standardised rate - per 100,000



Figure 15: Emergency hospital admissions for COPD

Source: Hospital Episodes Statistics 2021

Hartlepool's COPD hospitalisation rate has fluctuated across the reporting period, but has remained significantly worse than England throughout. Hartlepool's rate has not seen more than 2 consecutive years of reduction. While Hartlepool's rate fell by 22% in the two years from 2012/13 to 2014/15, 843 per 100,000 population to 656 per 100,000, this was followed by an increase 36%, 656 per 100,000 to 890 per 100,000. Hartlepool's rate is marked by a lack of consistency, though the first five years of the reporting period show a general reduction, this is mirrored in the subsequent years with a similar level of increase.

Smoking attributable hospital admissions in Hartlepool have been significantly worse than the England average throughout 2015/16 to 2019/20. Though the recent trend in Hartlepool is decreasing.

Smoking attributable hospital admissions (new method)

Directly standardised rate - per 100,000

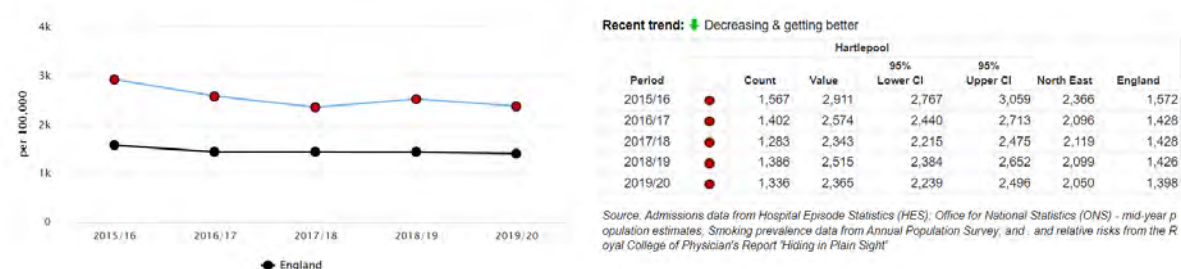


Figure 16 : Smoking attributable hospital admissions(new method)

Source: Admissions data from Hospital Episode Statistics (HES); Office for National Statistics (ONS) - mid-year population estimates; Smoking prevalence data from Annual Population Survey; and relative risks from the Royal College of Physician's Report 'Hiding in Plain Sight' 2021

There has been a general decline for smoking attributable hospital admissions in Hartlepool across the reporting period, with the gap between Hartlepool's rate and the England rate smaller in 2019/20 than in 2015/16, Hartlepool was 85% larger in 2015/16 and only 69% larger in 2019/20.

5.4 Smoking and mortality (Adults)

Smoking attributed mortality in Hartlepool has remained statistically worse than England throughout the five year reporting period.

Smoking attributable mortality (new method)

Directly standardised rate - per 100,000

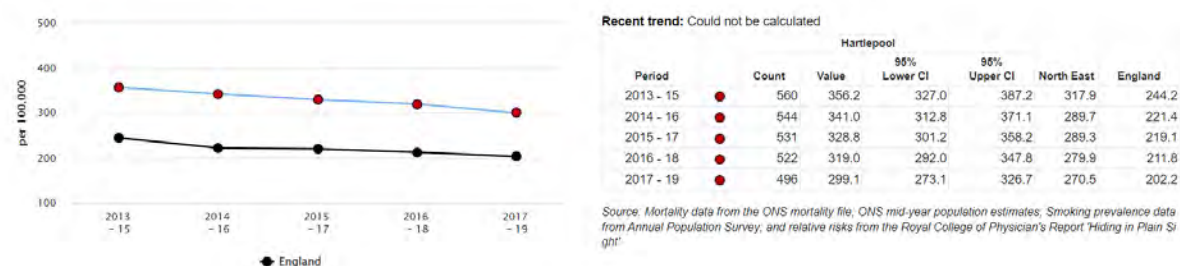


Figure 17 : Smoking attributable mortality (new method)

Source: Mortality data from the ONS mortality file; ONS mid-year population estimates; Smoking prevalence data from Annual Population Survey; and relative risks from the Royal College of Physician's Report 'Hiding in Plain Sight'. 2021

Hartlepool's smoking attributable mortality rate per 100,000 people has fallen from 356.2 in 2013/15 to 299.1 in 2017/19. This is a decline of 16%, which is comparable to the England decline of 17% during the same period. However, the gap between Hartlepool and England has also remained largely the same throughout this period.

Looking specifically at smoking attributable mortality from cancer, Hartlepool has again been statistically worse than England throughout the five year reporting period.

Smoking attributable deaths from cancer (new method)

Directly standardised rate - per 100,000

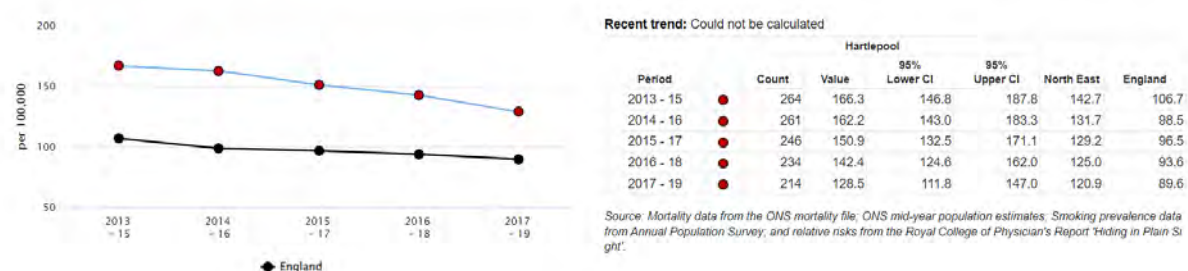


Figure 18: Smoking attributable deaths from cancer (new method)

Source: Mortality data from the ONS mortality file; ONS mid-year population estimates; Smoking prevalence data from Annual Population Survey; and relative risks from the Royal College of Physician's Report 'Hiding in Plain Sight'. 2021

Unlike the figures for all smoking attributable mortality, the specific cancer rate has declined in Hartlepool at a faster rate than the England average, shortening the gap between Hartlepool and England. In 2013-15 Hartlepool's rate was 56% larger than the England rate, but by 2017/19 this had fallen to 43% larger.

For heart disease the smoking attributable mortality rate in Hartlepool, unlike that of England, has not decreased every year across the five year reporting period.

Smoking attributable deaths from heart disease (new method)

Directly standardised rate - per 100,000

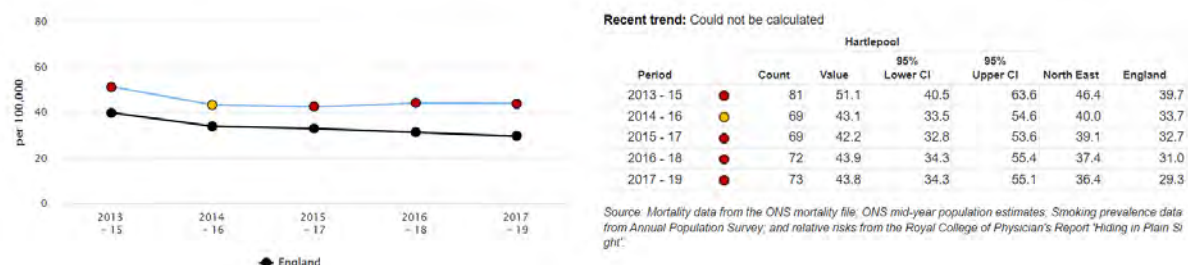


Figure 19 : Smoking attributable deaths from heart disease (new method)

Source: Mortality data from the ONS mortality file; ONS mid-year population estimates; Smoking prevalence data from Annual Population Survey; and relative risks from the Royal College of Physician's Report 'Hiding in Plain Sight'. 2021

Hartlepool's mortality rate in was 11.4 per 100,000 larger than England in 2013/15, this had increased to 14.5 per 100,000 larger in 2017/18. In percentage terms this increased moved Hartlepool from 29% larger in 2013/15 to 49% larger in 2017/19.

For smoking attributable mortality from stroke, Hartlepool has remained statistically similar to England throughout the reporting period. This is the only smoking attributable mortality indicator where Hartlepool has consistently been at a similar level to England.

Smoking attributable deaths from stroke (new method)

Directly standardised rate - per 100,000

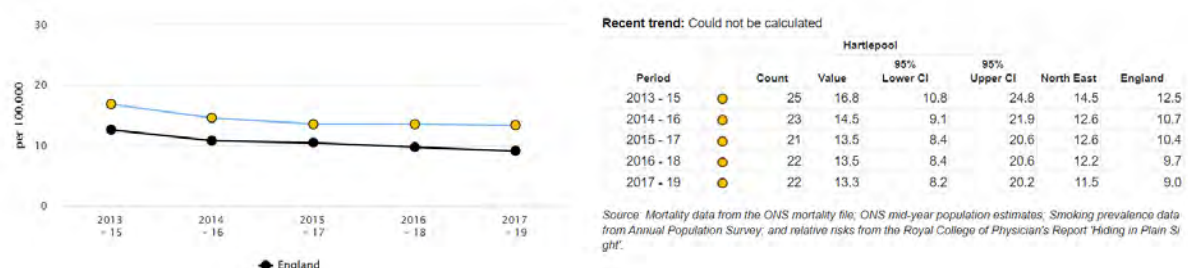


Figure 20 : Smoking attributable deaths from stroke (new method)

Source: Mortality data from the ONS mortality file; ONS mid-year population estimates; Smoking prevalence data from Annual Population Survey; and relative risks from the Royal College of Physician's Report 'Hiding in Plain Sight'. 2021

Hartlepool's rate per 100,000 has fallen from 16.8 per 100,000 in 2013/15 to 13.3 per 100,000 in 2017/19. However during this period Hartlepool's rate per 100,000 has moved from 34% larger than England's rate to 48% larger.

5.5 Long Term Health conditions (Adults)

The prevalence of smoking within those with a long term mental health condition in Hartlepool has been similar to the England average for the majority of the last eight years.

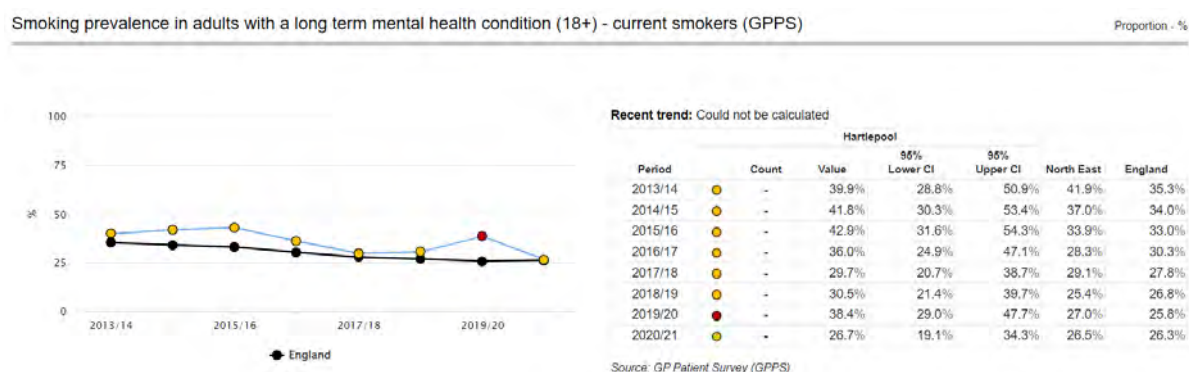


Figure 21: Smoking prevalence in adults with a long term mental health condition (18+) – current smokers (GPPS)
Source: GPPS 2022

Hartlepool's latest rate, 2020/21, of 26.7% is similar to the England rate of 26.3%. This is a return to a position of statistical similarity after the 2019/20 rate was statistically worse than England, 38.4% compared to 25.8% for England. The 2020/21 rate is a 30% reduction on the 2019/20 rate. Across the same period the odds of those with a long term mental health condition being a smoker has been at least 2.4 times as likely as for those without a long term mental health condition, rising as high as 3.4 times as likely in 2019/20.

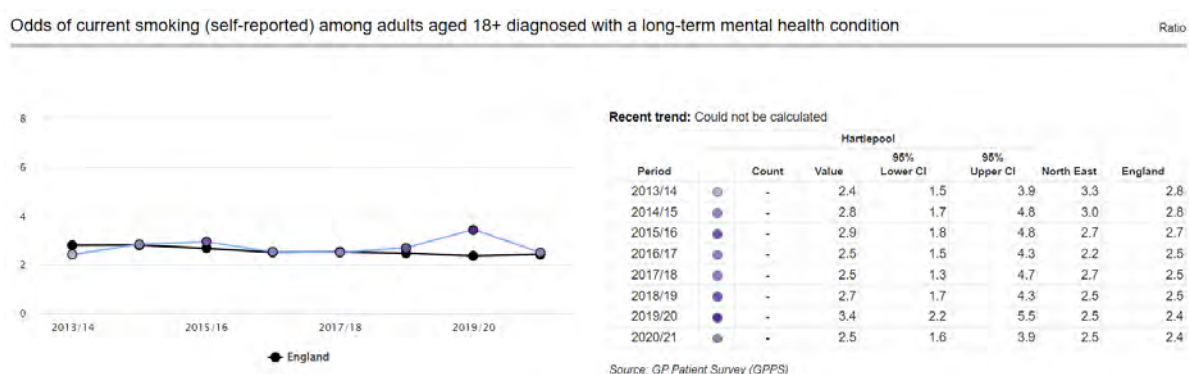


Figure 22: Odds of current smoking (self-reported) among adults aged 18+ diagnosed with a mental health condition
Source: GPPS 2022

The pattern of similarity to England has remained the same as that of the rate.

5.6 Smoking in Pregnancy

The Maternity Services Dataset (MSDS) looked at smoking in early pregnancy in 2018/19, and Hartlepool had the highest rate in the north east and the 3rd highest in England.

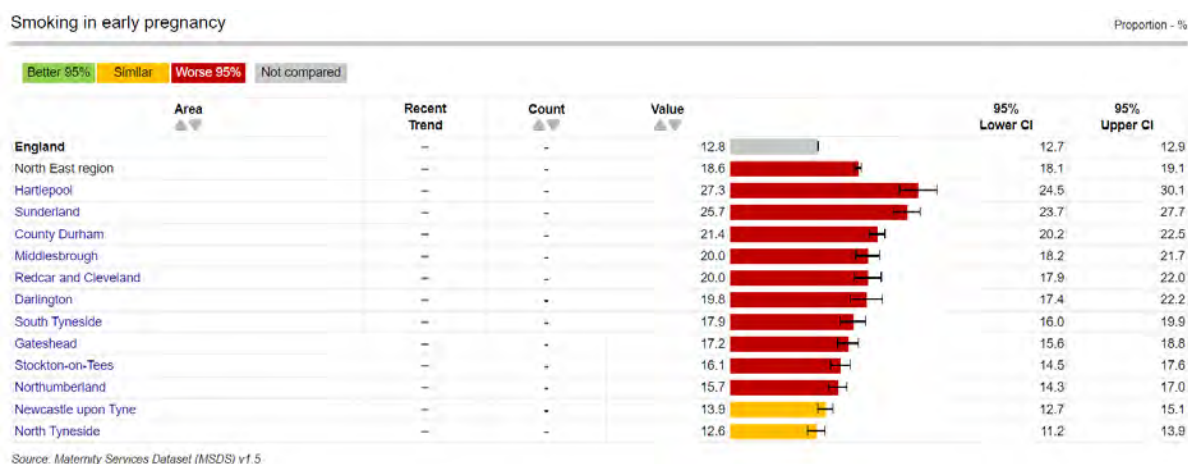


Figure 23: Smoking in early pregnancy

Source: MSDS 2019

Hartlepool's rate of 27.3% is more than twice the England rate of 12.8% and almost 1.5 times the north east rate of 18.6%.

Hartlepool's rate of mothers who are smokers at the time of delivery of their baby has remained significantly worse than the England average throughout the last 12 years.



Figure 24: Smoking status at time of delivery

Source: PHE & NHS Digital 2022

The rate for Hartlepool has fallen by 39% from 2010/11 to 2021/22, compared with a 33% decline for the England rate in the same period. Looking at the smoking status at time of delivery at a Middle Super Output Area (MSOA) level in Hartlepool from 2019/20 to 2021/22, every MSOA has reduced by at least 5.9%, though the largest reduction is Harbour, Victoria & Wooler Road, which has reduced by 79.4%.

Smoking at Time of Delivery – Hartlepool MSOA 2019/20 to 2021/22

	2019/20	2020/21	2021/22	% Decrease from 2019/20 to 2021/22
Clavering	10.2	8.4	3.0	71.0
Headland & West View	38.3	22.0	19.2	49.8
Jesmond	34.3	35.2	19.5	43.2
Old Town & Grange	27.0	24.0	6.4	76.2
Foggy Furze	29.0	32.6	23.3	19.7
Rift House & Summerhill	41.2	22.1	9.2	77.7
Rossmere & Mill	11.1	11.3	10.5	5.9
Seaton Carew	1.5	1.7	0.8	46.1
Owton Manor	21.7	35.4	19.1	11.9
The Fens, Elwick & Hart	2.7	2.5	1.8	34.4
Harbour, Victoria & Wooller Road	24.6	20.7	5.1	79.4

Figure 25: Smoking at Time of Delivery – Hartlepool MSOA 2019/20 to 2021/22

Source: NHS FT 2023

The rate for premature births in Hartlepool has recently moved from a position of statistical similarity with England, to significantly worse than England.

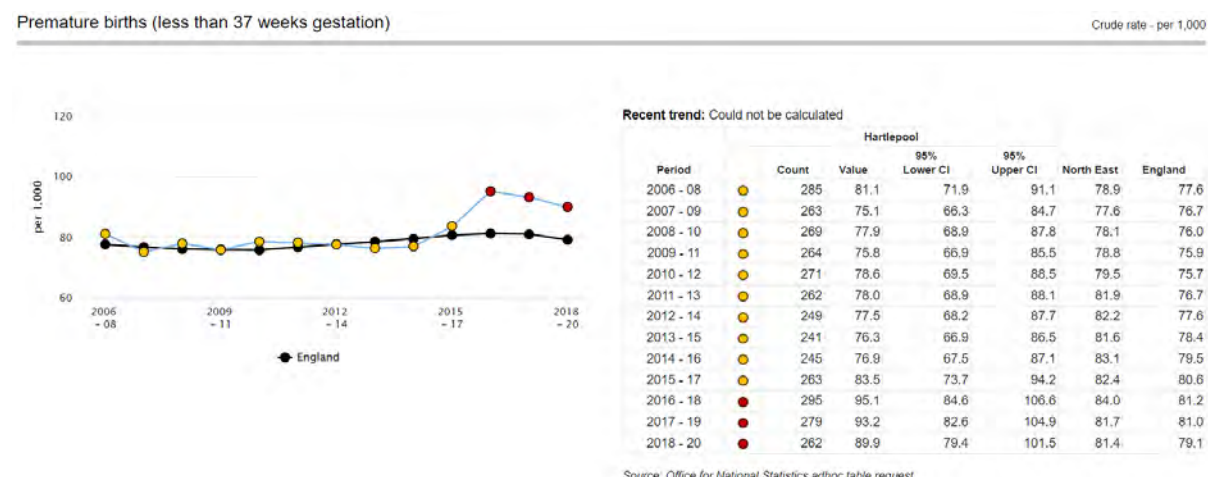


Figure 26: Premature births (less than 37 weeks gestation)

Source: ONS 2022

After a period of 10 consecutive years of similarity with the England rate, Hartlepool has, since 2016/18, had a rate of premature births that is significantly worse than the England rate. The gap between Hartlepool and England has close during the three year period of significant difference. In 2016/18 Hartlepool was 17% higher than England, but by 2018/20 this had fallen to 14%.

For low birth weight for full term babies, Hartlepool has followed a similar pattern to premature births, but has regained its statistical similarity to England after one year.

Low birth weight of term babies

Proportion - %



Figure 27: Low birth weight of term babies
Source: ONS 2023

Hartlepool again had a sustained period of statistical similarity with England, 2006-2017, before an increase in rate in 2018 moved Hartlepool to significantly worse than the England rate. However unlike premature births, the rate for low birth weight babies regained its position of statistical similarity to England in 2019, and maintained this in 2020.

6.0 Young People

In 2021 the NHS England conducted a survey looking at smoking, drinking and drug use in young people. The survey dealt with 11-15 year olds and the results were published regionally, the North East rates for smoking status are shown below:

Smoking Status	%
Not answered	0.8
Don't know	0.2
I have never smoked	83.6
I have only ever tried smoking once	7.5
I used to smoke sometimes but I never smoke a cigarette now	3.0
I sometimes smoke cigarettes now but I don't smoke as many as one a week	3.1
I usually smoke between one and six cigarettes a week	0.5
I usually smoke more than six cigarettes a week	1.3

Figure 28: Young people survey looking at smoking, drinking and drug use (11-15yrs)
Source: NHS Digital: Smoking, Drinking and Drug Use among Young People in England, 2021

If these rates are applied to Hartlepool's 11-15 year old population, then the numbers would be:

Smoking Status - Hartlepool	Count
I have never smoked	4934
I have only ever tried smoking once	445

I used to smoke sometimes but I never smoke a cigarette now	176
I sometimes smoke cigarettes now but I don't smoke as many as one a week	185
I usually smoke between one and six cigarettes a week	28
I usually smoke more than six cigarettes a week	74

Figure 29: Young people survey (11-15yrs) applied to Hartlepool

Source: NHS Digital Smoking, Drinking and Drug Use among Young People in England, 2021

These figures would give Hartlepool a populations 909 young people who have at some point smoked a cigarette. This 909 can be broken down into regular, occasional and ex-smokers:

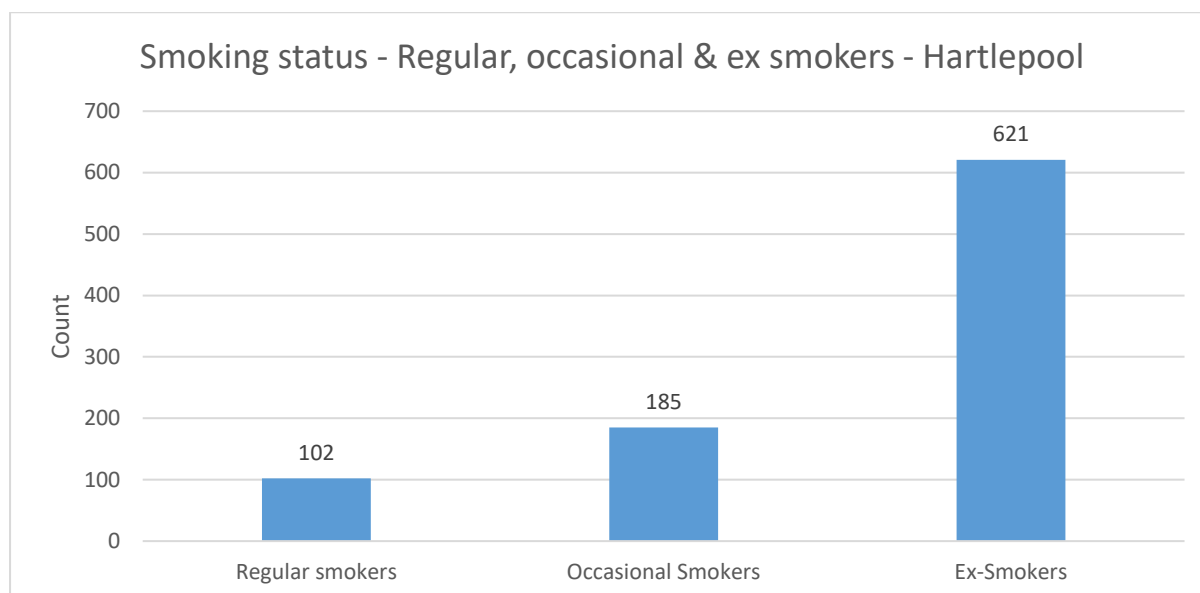


Figure 30: Smoking status of young people – Hartlepool

Source: NHS Digital: Smoking, Drinking and Drug Use among Young People in England, 2021

A survey by Action on Smoking and Health (ASH), the ASH smokefree GB Survey 2022, found that in 11-17 year olds in Great Britain, 83.8% of young people had never tried an e-cigarette, with 15.8% admitting to having tried an e-cigarette. The rate of regular e-cigarette use was 3.1% of 11-17 year olds.

If we apply these rates to Hartlepool it would produce the following e-cigarette use populations:

Hartlepool e-cigarette Use	Count
Never tried an e-cigarette	6830
Tried e-cigarette	1288
Regular e-cigarette user	253

Figure 31: Young people survey of e-cigarette use- applied to Hartlepool Smokefree GB, 2022

Source: ASH

The figure for those who have tried an e-cigarette can be broken down into regular, occasional and ex users:

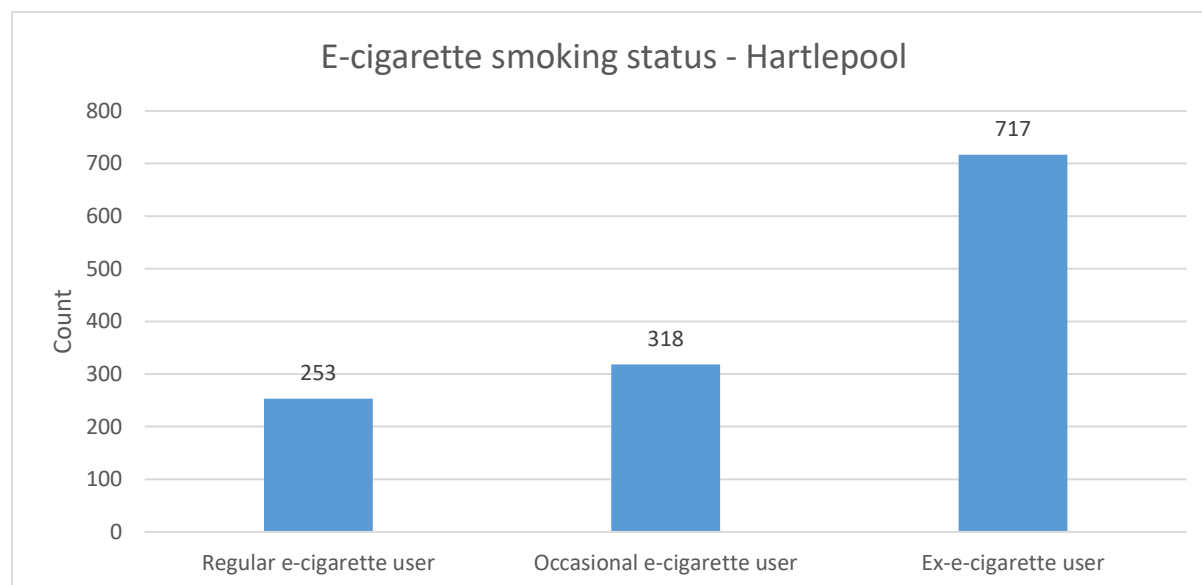


Figure 32: E-cigarette smoking status – Hartlepool

Source: ASH Smokefree GB, 2022

The ASH survey found that e-cigarette use in 11-17 year olds had increased over the period of 2013-22, with 3.8% stating they had tried an e-cigarette in 2013, 0.6% regular users, to 15.8% in 2022, 3.1% regular use.

Hospital admissions for asthma in those aged under 19 years old in Hartlepool continues to be at a level similar to the England average.

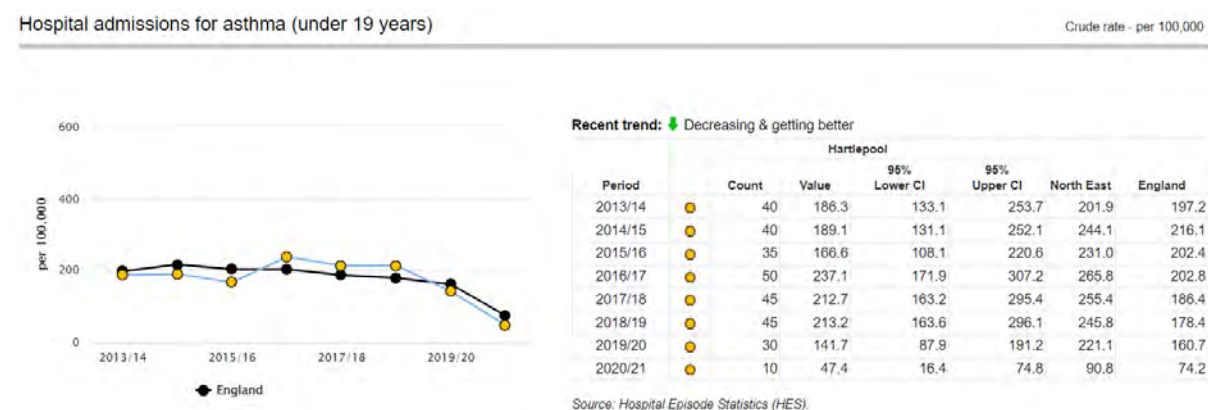


Figure 33: Hospital admissions for asthma (under 19 years)

Source: Hospital Episode Statistics (HES) 2022

Hartlepool has seen a large decline in its rate of hospitalisations for asthma in the under 19s across the eight year reporting period, from 186.3 per 100,000 population in 2013/14 to 47.4 per 100,000 in 2020/21. This is a reduction of 75%, during the same period England saw a reduction of 62%.

Self-reported smoking amongst Hartlepool's young people's substance misuse services is very different to the England average.

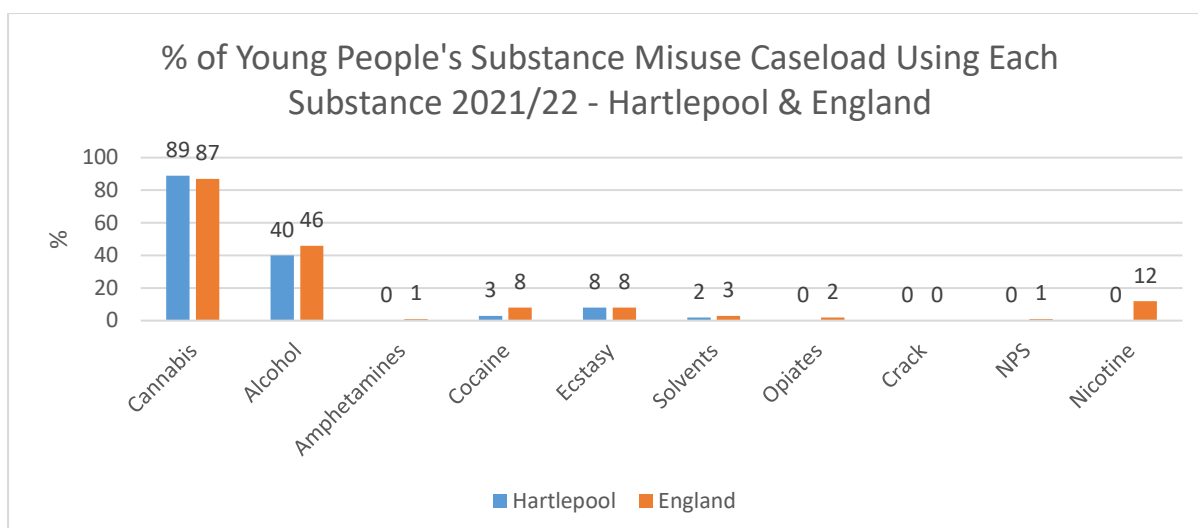


Figure 34: Percentage of young people's substance misuse caseload using each substance 2021/22 – Hartlepool & England
Source: NDTMS 2022

Hartlepool did not register any nicotine use amongst its young people's substance misuse caseload across the five year reporting period, this is very different from the England average where almost 1 in 8 people in young people's substance misuse treatment are using nicotine.

7.0 Enforcement

Data from Hartlepool's Trading Standards team shows that vaping and e-cigarettes are becoming an increasing issue in Hartlepool in regards to underage sales, while traditional cigarettes have generated very few underage sales complaints since 2014.

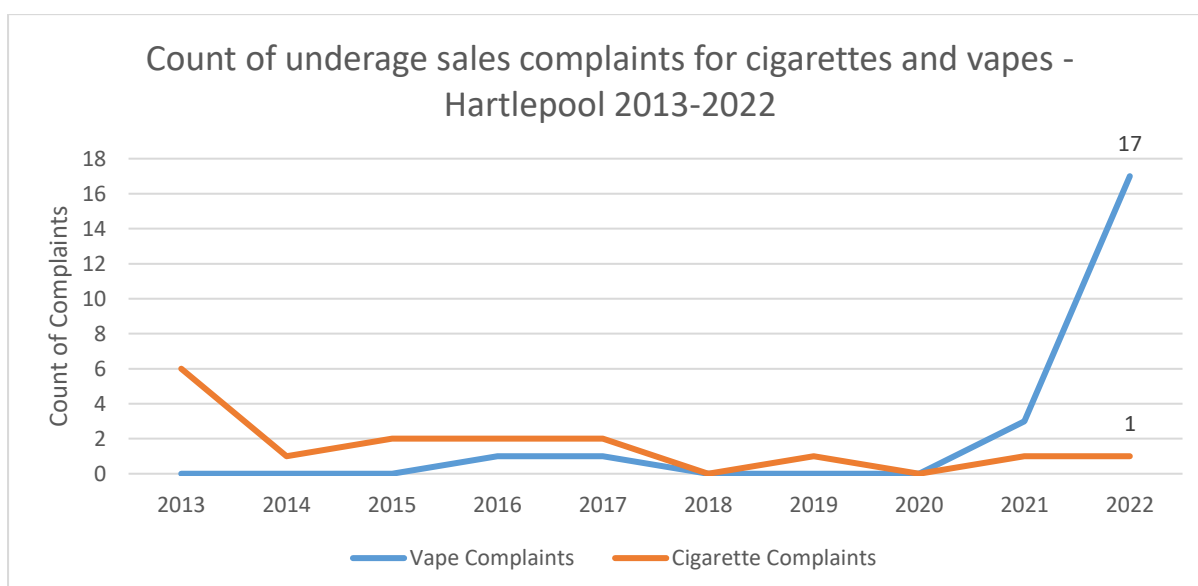


Figure 35: Count of underage sales complaints for cigarettes and vapes- Hartlepool 2013-2022
Source: Hartlepool Trading Standards 2023

Underage sales of cigarettes have generated no more than two complaints in a given year between 2014 and 2022. In contrast, e-cigarette sales have generated 20

underage sales complaints in the two year period 2021/22, with 17 of them coming in 2022. In the eight years before 2021 combined there had only been two underage sales complaints relating to vaping or e-cigarettes. This shift is also visible in the proportion of all underage sales complaints received in Hartlepool for cigarette and vaping/e-cigarettes:

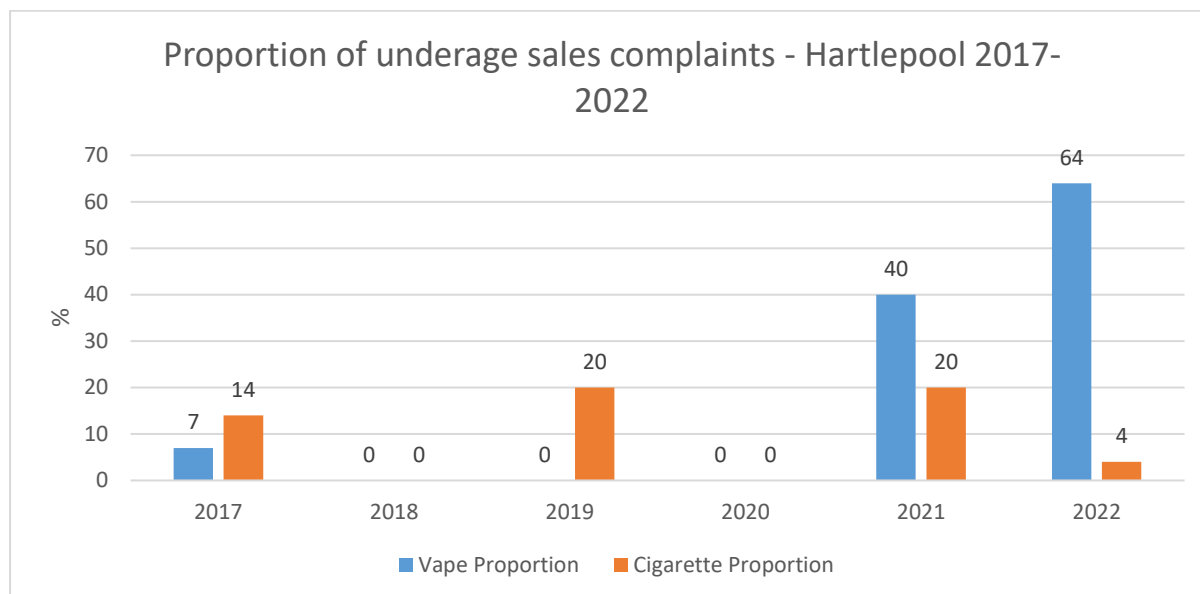


Figure 36: Proportion of underage sales complaints – Hartlepool 2017-2022
Source: Hartlepool Trading Standards 2023

8.0 Support Services data

Combined service data from the local Community Navigators and maternity services in Hartlepool shows that across the seven quarters from 2021/22 Q1 to 2022/23 Q3, the largest proportion of service users setting a quit date was 17.6% in 2021/22 Q1, however two quarters, 2021/22 Q4 and 2022/23 Q1 had no one set a quit date.

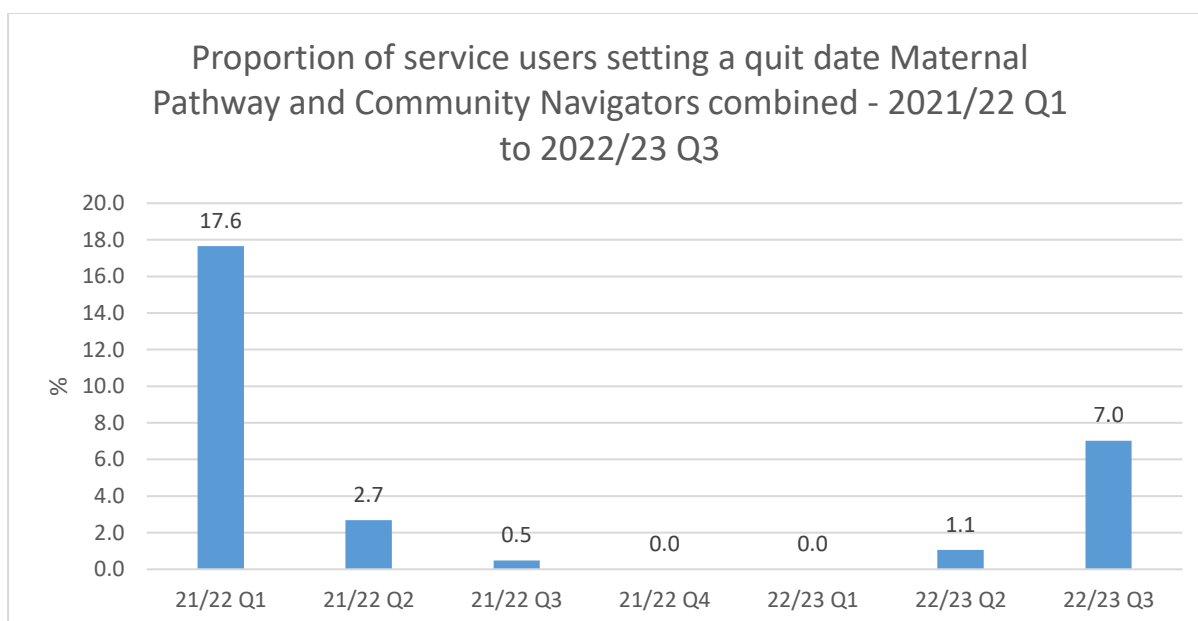


Figure 37: Proportion of service users setting a quit date -Community navigator and maternity pathway data combined
Source: Local data 2023- Combined community navigators and maternal pathway

During this period, only two quarters had any self-reported successful outcomes, which account for 2.7% of people seen in 2012/22 Q2 and 0.2% of people seen in 2021/22 Q3.

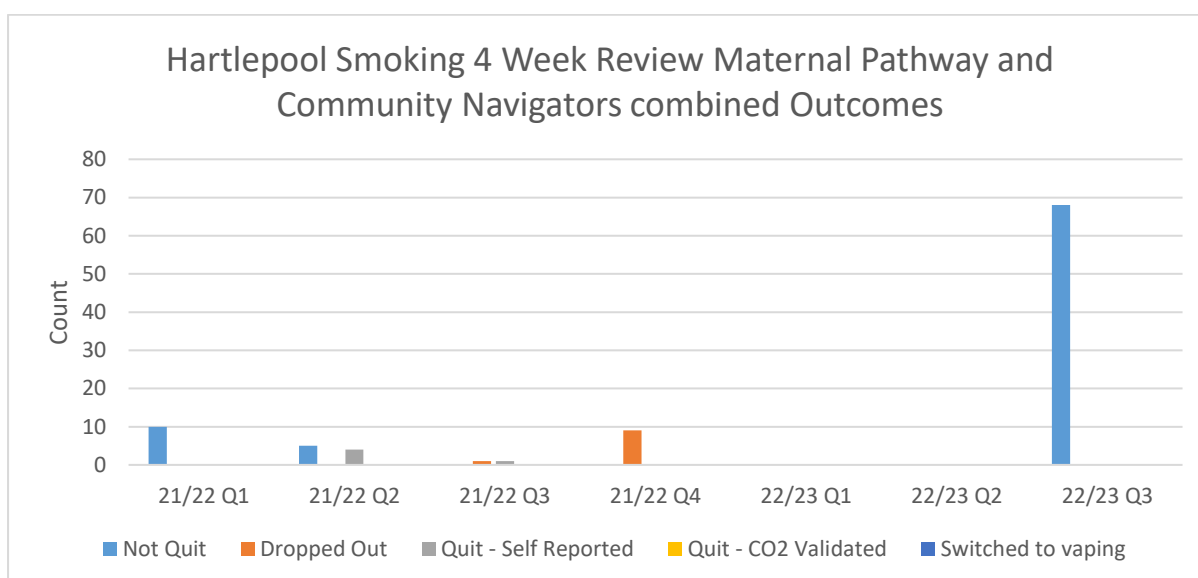


Figure 38: Hartlepool smoking 4 week review maternal pathway and community navigator combined outcomes.
Source: Local data 2023- Combined community navigators and maternal pathway

Staff support

Across the North East & North Cumbria NHS Integrated Care Board a smoke free care pathway has been introduced from July 2022 for the staff members. In Hartlepool local authority services 8 people have signed up, and across the North Tees & Hartlepool NHS Trust and the Tees, Esk & Wear Valley Mental Health trust, a further 121 people have joined the pathway.

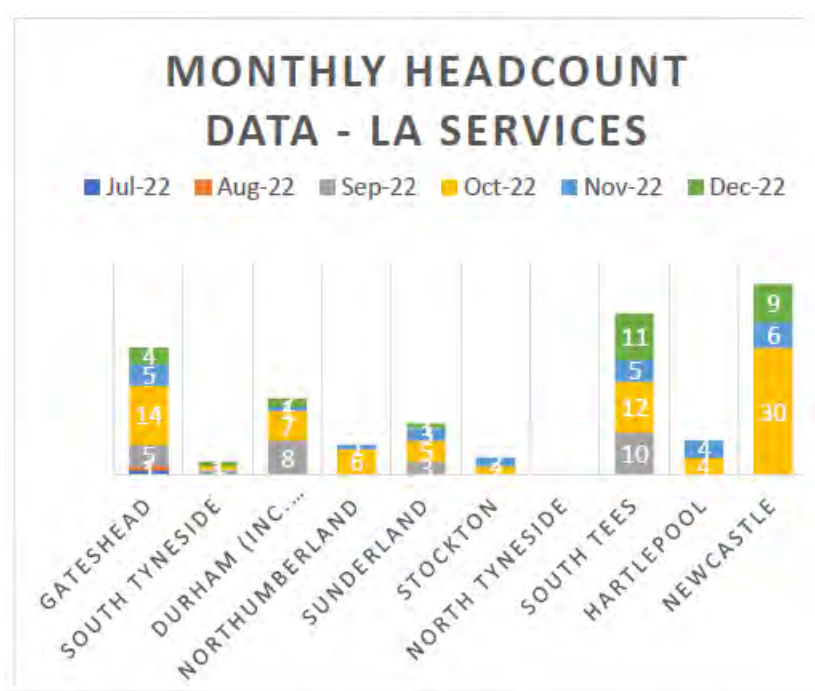


Figure 39: Monthly Head count data – staff supported by community navigators
Source: NENC ICB 2023

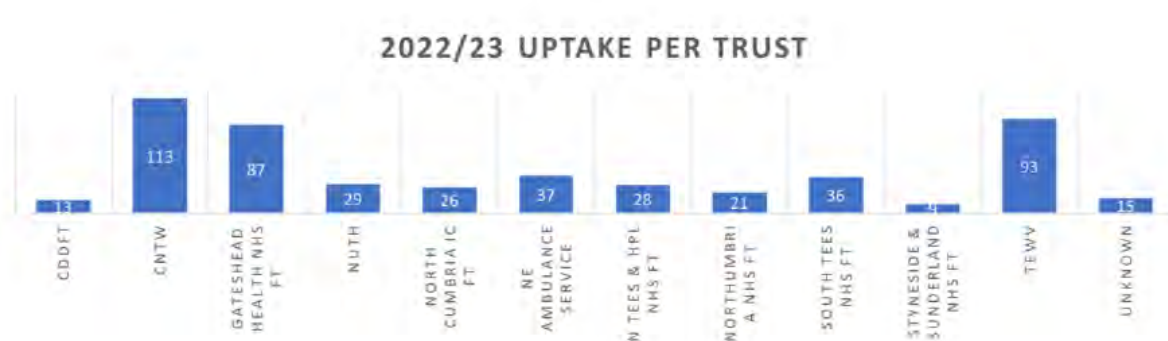


Figure 40: All staff being supported
Source: NENC ICB 2023

Across this pathway the quit rate at 28 days was 50%, with 80% of participants opting to use vaping as part of their quitting strategy.

Children and Young people's Service

In Hartlepool's 0-19 service in 2022/23, more than half of the service users had never smoked (57.6%), with 16.8% declaring themselves current smokers. A combined 14.2% of the 0-19 caseload over year were seeking some form of advice or using an e-cigarette to quit smoking.

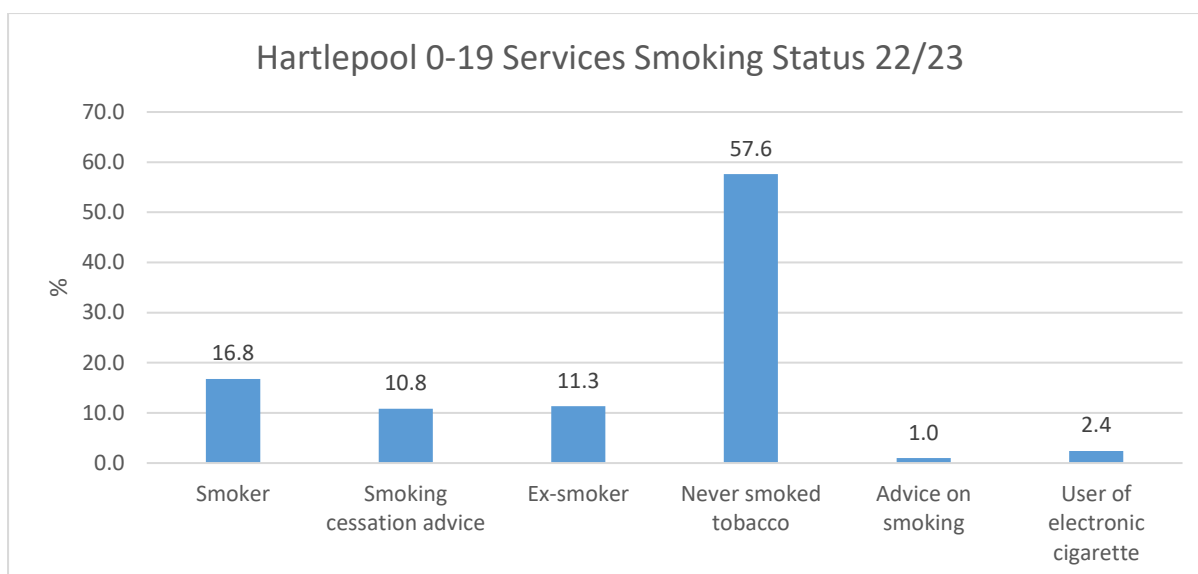


Figure 41: Hartlepool 0-19 Services – smoking status
Source: Local data 2023

9.0 Service provision in Hartlepool

Hartlepool Borough Council decommissioned the existing Specialist Stop Smoking Service in 2019. A new service provision was then developed using a multi-agency, community based approach to provide stop smoking services to its residents.



Population Approach
to Stopping Smoking

Although there was no funding available for the service and the model was dependent upon residents buying their own products and accessing behavioural support through a multitude of agencies in the community. The ambition was a smoker in Hartlepool could gain support to stop smoking through a variety of community based support mechanisms convenient to them. The ideology being support to stop smoking was everyone business and across all age groups. This approach also included working closely with VAPE shops as vaping was becoming locally a preferred option to help stop smoking.

This model was underpinned by all multi agency staff being advised to participate in the national on line training available <https://www.ncsct.co.uk/> this included core competencies required to support a quit attempt.

The effects of the COVID pandemic, availability of VAPE shop provision, capacity within multi agency partners to support, unavailable funding streams had a considerable impact on this service development.

However, as part of COVID recovery an opportunity has arisen to revisit and support the development of a stronger Hartlepool Smoking Alliance that will help coordinate

the new activities being developed to support stop smoking for Hartlepool residents. The current refreshed model highlights the new and developing services that have recently been launched as part of the long term plan ambitions within NHS organisations and it is hoped these services will compliment and work alongside existing service provision for Hartlepool communities.



Population Approach
to Stopping Smoking

All of which are underpinned by the national training to ensure a standardised approach to giving support to stop smoking, new NICE guidance (ref) and using Vaping recommendations.

9.1 Council service model



Community
Navigator process pa

The Council service model is dependent upon residents buying their own products and accessing behavioural support via a community navigator. The community navigators are trained staff who can offer a programme of support to stop smoking and stay stopped, they offer CO readings, they can signpost to websites and apps, discuss ways to cope with cravings, tailor support to individual needs and offer face to face, telephone and group support for 12 weeks or more.

9.2 Smoking Cessation in Secondary Care

The North East and North Cumbria (NENC) Integrated Care system (ICS) Population Health and Prevention board identified the treatment of tobacco dependence and reducing harm from tobacco as one of its priority areas. Within its delivery plan the implementation of the NHS Long Term Plan (LTP) ambitions was a key objective. The NHS LTP outlines commitment to support people keeping healthier for longer, through the funding of cost effective, evidence based NHS prevention programmes, with the key priority being a focus on further reducing smoking rates. The LTP sets out a requirement for NHS funded services to treat tobacco dependence to be made available to all in patients (Acute & Mental Health), pregnant women and higher risk patients who smoke by March 2024. The services are in addition to existing community based services as part of the system wide partner approach to treating tobacco dependency.

The NHS Tobacco Treatment Service pathways currently in place across 3 elements – Maternity, Mental Health in patients and Acute in patients.

Maternity services / pathway (see appendix 3) – A dedicated pathway to support pregnant women and their partners who smoke with a personalised quit plan including medication. Pregnant women are routinely screened at maternal booking appointments and smoking status established. All smokers are referred to in house smoking support workers for support, medication and development of a quit plan. All professionals involved with pregnant women actively participate in the pathway to support the pregnant women's journey in both the antenatal period and post-natal period. Structured support is offered in line with NCSCCT standards throughout the maternity care pathway.

Mental health inpatient provision/ pathway (see appendix 4) - A dedicated pathway to support identified smokers on admission to hospital offers brief advice and NRT routinely within 2 hours. The focus is on harm reduction as well as treatment to stop smoking. Support is continued whilst in hospital, on discharge an agreed discharge plan is developed and support is continued to be provided by the Mental Health Trust.

Acute inpatient provision/ pathway (see appendix 5) – A dedicated pathway to support identified smokers on admission and offer brief advice and NRT routinely. Tobacco treatment advisors based in the hospital see all smokers while they are in hospital and agree a personalised support plan. Support is continued whilst in hospital and on discharge patients are given a personalised discharge plan and continued treatment for up to 2 weeks.

9.3 Smoking Cessation for NHS Staff (pilot)

NHS Staff provision/ pathway (see appendix 6) – A dedicated pathway of support to help reduce smoking rates within the NHS workforce providing NRT or E-cigarettes, behavioural support and free premium access to a Smokefree App. Funding from NENC ICS in December 2021 supported the development a NHS Staff smoking cessation pilot. The aim being to address health inequalities in the NHS workforce, using employment in the NHS as a vehicle for identification and delivery of intervention focusing on smoking cessation. Provision of barrier free access to smoking cessation support aims to reduce smoking rates within the NHS workforce and help with culture shift of NHS to treat tobacco dependency of patients.

10.0 Recommendations

Following a needs assessment of the local population, a review of the evidence and national guidance several recommendations can be made:

- **Ensure that services reflect Hartlepool's ambition to reduce health inequalities by focusing on deprived communities and priority groups**
 - Public Health to use the data from this needs assessment and the CLear improvement model self-assessment tool, to inform a service model which focuses on addressing inequalities and enhances provision, currently delivered within the existing NHS and Community Navigator pathways.
 - Use the data to ensure we are using targeted approaches to address health inequalities:
 - Use local data to target activity in geographical areas as well as population groups e.g. using IMD data to target illicit tobacco supply, illegal tobacco sales and high smoking prevalence
 - Continue the decline in the proportion of smokers in routine and manual occupations in Hartlepool
 - Data has shown that smoking related health conditions particularly in relation to cancers and Chronic obstructive pulmonary disease (COPD) are worse than England also smoking attributable admissions have historically been significantly worse than the England average although the recent trend is decreasing
 - Maternity services data set in relation to smoking in early pregnancy 2018/19 shows Hartlepool had the highest rate in the North East, further work needs to be carried out to understand the impact of the current maternal pathway on this data (see below)
 - Work with existing voluntary organisations and community champions to understand health inequalities and inequality of access that affect service take up.
 - Support the work of School nurses with young people around smoking and risk taking behaviour. Encourage agencies to work in partnership to target and educate around the increase in youth vaping,(police, schools, trading standards, school nurses)
- **Improve the collection and sharing of data and intelligence between partners and services**
 - Support partners to use a population health management approach to understand and respond to smoking related harms and associated health inequalities
 - Local data relating to smoking prevalence in young people is not available; for the purposes of this needs assessment rates have been applied using a national survey (ASH) further work with FRESH is needed to understand the needs of children and young people who smoke or use vaping products.

- Use local data and intelligence to develop a local tobacco control strategy and action plan that has appropriate and measurable outcomes.
- Further work is needed with substance misuse services in relation to quantifying the numbers of children and young people who smoke /use vaping products who access substance misuse services.
- **Understanding the provision and impact of the current smoking support pathways**
 - Further work to be undertaken to use Nice Quality Standards to assess standards of smoking cessation advice/ referrals in secondary care and community services (by Midwives/ Medics/ other Health Care personnel, 0-19 service and Community Navigators).
 - Standardised audit of pathways, documentations and data.
 - Services to complete the CLeaR assessment tools¹⁹ relevant to their service areas to include; maternity, alcohol and drugs, illicit tobacco and mental health
 - Look at the further opportunities to support and enhance the implemented integrated stop smoking support in particular the pathways for staff, inpatients, pregnant women and their significant partner and mental health services, in line with the NHS Long Term Plan.
 - Improve pathways and service provision for people with in contact with substance misuse services who require support to stop smoking
- **The Alliance will lead the development of a new Tobacco Control Strategy focusing on the following key areas:**
 - 1. To Reduce health inequalities caused by smoking and support vulnerable groups to be Smokefree**
 - 2. To protect children and young people from tobacco and encourage Smokefree pregnancies**
 - Develop a new tobacco control strategy and action plan and factor in support from FRESH to inform the development of a co-ordinated local communication strategy.
 - Develop a new plan for smoke free places – particularly around young people e.g. schools, parks, sports clubs, work places.
 - Data shows an increase in underage and illicit sales in relation to cigarettes and vapes. We need to develop an illicit tobacco plan with partners to coordinate action (enforcement of underage sales, illicit tobacco)
 - Provide clear guidance to professional and public on the use of e-cigarettes including:
 - Use of e-cigarettes as an approved harm reduction technique

- The potential risk of continued nicotine addiction
- Develop a tobacco control dashboard of key indicators with annual reporting to the Health and Wellbeing Board
- Strengthen the role of those with lived experience in the tobacco control action plan

Appendix 1

11.0 NICE guidance

This needs assessment has been informed by the following National Institute for Health and Care Excellence (NICE) guidelines:

- NICE (2022) Tobacco: treating dependence Quality standard [QS207]²⁰
- NICE (2021) Tobacco: preventing uptake, promoting quitting and treating dependence²¹
- NICE (2021) Tobacco: preventing uptake, promoting quitting and treating dependence²²
- NICE (2015) Smoking: reducing and preventing tobacco use Quality standard [QS82]²³
- NICE (2007) Behaviour change at population, community and individual levels²⁴
-

Other guidelines:

- E-cigarettes and vaping: policy, regulation and guidance. Evidence on the impact of e-cigarettes, information on government policy and regulation, and guidance for organisations on vaping policies²⁵.
- National Centre for Smoking Cessation and Training (NCSCT)²⁶

Appendix 2 Provision of support across Hartlepool 2019 to 2022 current.

Provision of support 2019



Support to Stop
Smoking Services 201

Hartlepool Borough Council decommissioned the existing Specialist Stop Smoking Service in 2019. A new service provision was then developed using a multi-agency, community based approach to provide stop smoking services to its residents as seen in the diagram. Although there was no funding available for the service and the model was dependent upon residents buying their own products and accessing behavioural support through a multitude of agencies in the community.

Provision of support 2022 to current



Support to Stop
Smoking Services 202

Post COVID and with NHS funding for stop smoking support within Foundation Trusts as apt of ICS prevention funding streams an opportunity arose to revisit and support the development of a stronger Hartlepool Smoking Alliance to help navigate activities that will help refresh a model of support to stop smoking for Hartlepool residents that will compliment and work alongside the new stop smoking services that have been recently launched a part of the long term plan ambitions within NHS organisations.

All of which are underpinned by the national training to ensure a standardised approach to giving support to stop smoking, new NICE guidance (ref) and using Vaping recommendations.

Appendix 3 Maternity services / pathway



Draft Updated North
East LMS Tobacco De

Appendix 4 Mental Health NHS Inpatient provision/pathway



In patient pathway -
TEWV.pdf

Appendix 5 Acute NHS Inpatient provision/pathway



Acute InPatient
Pathway.docx

Appendix 6 NHS Staff provision/ pathway – pilot



Staff offer -
pathway.pptx

References

- 1 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/630217/Towards_a_Smoke_free_Generation_-_A_Tobacco_Control_Plan_for_England_2017-2022_2_.pdf
- 2 DHSC press release –GOV.UK (www.gov.uk) quoting discussion of Lavery AA, Filippidis FT, Taylor-Robinson D, et al Smoking uptake in UK children : analysis of the UK Millennium Cohort Study Thorax 2019: 74:607-610.
- 3 <http://ash.org.uk/toolkit/cost-of-social-care/>
- 4 DH analysis on Health Survey for England 2014 data.
- 5 <https://ash.org.uk/media-centre/news/press-releases/smoking-costs-society-17bn-5bn-more-than-previously-estimated>
- 6 <https://www.who.int/news/item/11-05-2020-who-statement-tobacco-use-and-covid-19>
- 7 <https://covid.joinzoe.com/post.covid-smoking-risk>
- 8 <https://thorax.bmj.com/content/early/2021/09/12/thoraxjn-2021-217080>
- 9 <https://pubmed.ncbi.nlm.nih.gov/32206052/>
- 10 <https://ash.org.uk/resources/view/use-of-e-cigarettes-among-young-people-in-great-britain>
- 11 <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>
- 12 <https://www.gov.uk/government/publications/the-khan-review-making-smoking-obsolete>
- 13 <https://www.longtermplan.nhs.uk/online-version/>
- 14 Joint Health and Wellbeing Strategy | Joint Health and Wellbeing Strategy | Hartlepool Borough Council
- 15 <https://northeastnorthcumbria.nhs.uk/integrated-care-partnership/>
- 16 https://www.hartlepool.gov.uk/downloads/file/8507/director_of_public_health_annual_report_2022
- 17 https://www.hartlepool.gov.uk/downloads/file/6941/council_plan_202122_-_202324
- 18 <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>
- 19 <https://www.gov.uk/government/publications/clear-local-tobacco-control-assessment>
- 20 <https://www.nice.org.uk/guidance/qs207>
- 21 <https://www.nice.org.uk/guidance/ng209>
- 22 <https://www.nice.org.uk/guidance/ng209>
- 23 <https://www.nice.org.uk/guidance/qs82>
- 24 <https://www.ncsct.co.uk/usr/pub/guidance-on-behaviour-change-at-population.pdf>
- 25 <https://www.gov.uk/government/collections/e-cigarettes-and-vaping-policy-regulation-and-guidance>
- 26 <https://www.ncsct.co.uk/>

1. Building infrastructure, skills and capacity for local tobacco control delivery						
	How	Who	Regional/Local	Outcomes	Timescales/ RAG	Comments
Deliver the priorities of the Tobacco Strategy and action plan through the Tobacco Alliance for Hartlepool with a focus on: <ul style="list-style-type: none"> Reducing health inequalities caused by smoking and support vulnerable groups to be Smokefree Protecting children and young people from tobacco and encourage Smokefree pregnancies 	Work with Alliance partners to: Agree annual priorities based on the action plan. Develop a data monitoring dashboard Work with partners to enhance and develop a support offer for specific targeted groups based on the findings of the needs assessment and evidence base. Use communications targeted at specific groups including; pregnant mums, partners	Public Health, Alliance partners	Local/regional	Reduction in people smoking in the general population Reduction in smoking in targeted groups, i.e. smoking in pregnancy. Increase in numbers accessing support to stop smoking	August – December 2023	Needs assessment completed Local HBC provision CLeaR assessment completed. Tobacco control strategy drafted Alliance membership refreshed Terms of references being developed Vape pilot proposal submitted to national team. Work with Fresh commenced to look at a communication plan
Utilise the support of Fresh partnership website www.fresh-balance.co.uk in the development of the Alliance	Access Fresh support around key areas – <ul style="list-style-type: none"> Media campaigns / year round and significant events. 	Public Health, Alliance & Fresh	Regional / Local	Fresh quarterly report Numbers of media campaigns	August – December deliver specific themed	Fresh supporting with strategy work – Strategy day & planning.

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

6.1 Appendix 3

to ensure we have access to the latest tools and resources	<ul style="list-style-type: none"> Guidance around action planning. Support advocacy planning Support evidenced based practice 			Reach of campaigns – social media, press Numbers accessing website	sessions to Alliance members Review Fresh campaigns quarterly	Deliver themed Alliance sessions- Vaping, Communications, Illicit tobacco planned
Use evidence based tool kits with Alliance partners to help with local planning and delivery of actions.	Work with partners to ensure the use of toolkits to assist with their approaches to address priorities.	Public Health, Alliance & Fresh	Regional / local	Audit results of toolkits used in order to understand service improvements	Reviewed annually 2023-24	
Share national, regional and local updates and develop opportunities to share knowledge and practice across systems in Hartlepool	Share updates with partners via email distribution Use workshops, alliance events to share practice and learning within the locality.	Public Health & Smoking Alliance	local	Increased numbers of partners attending workshops	Reviewed annually 2023-24	
Audit smoking pathways, documentation and data across stakeholders, Alliance partners and communities	Develop a robust process for data/ information collection and analysis.	Public Health & Alliance partners	Local	Data shows quality service provision Case studies used for client experience audits.	August – December agree process and data collection	Reports shared at Alliance meetings
Work with partners to enable them to complete CLeaR assessment tools relevant to their service areas, to include maternity, drugs and alcohol, , illicit tobacco and mental health services to identify improvements for service delivery	Agree timescales with partners for completing the following CLeaR assessments – <ul style="list-style-type: none"> Maternity Drug and alcohol Illicit tobacco Mental health services 	Public health & Alliance partners	Local	Clear assessments completed within timescales	April 2024	Outcomes of Clear assessments shared .at Alliance meetings

Work with partners to agree and implement a collaborative approach to enhance existing stop smoking support in particular the pathways for staff, in patients and mental health services, in line with the NHS Long Term Plan.	<p>Identify gaps in current service provision for targeted groups.</p> <p>Develop a support offer to address service provision gaps</p> <p>Develop specific vape offer for targeted adult population</p>	Public Health & service providers	local	<p>Increased provision of support for people wanting to stop smoking including vape offer</p> <p>Increase in the numbers of quit attempts</p> <p>Increase in numbers of people achieving 4 week quit attempt</p> <p>Numbers of people achieving quit at 12 week review</p>	August 23 – April 24	<p>Reviewed current provision</p> <p>Vape pilot commenced August 2023 targeting people accessing NHS Health Checks via GP practices, behavioural support offered by Community Navigators</p> <p>Vape pathfinder project proposal submitted July 2023 awaiting confirmation of start date</p>
Priority 2. Advocacy for evidence based policies and legislation to achieve a Smokefree 2030 and to minimise influence of the tobacco industry						
	How	Who	Regional/Local	Outcomes	Timescale/RAG	Comments
Utilise support from Fresh to work with Hartlepool Tobacco Alliance members to ensure there is an understanding of tobacco industry influences and how to avoid interference	<p>Work with Fresh deliver dedicated session to increase partner understanding of Tobacco industry influences</p> <p>Share Fresh communications with</p>	Alliance & Fresh	National, regional & local	<p>Partners have increased knowledge.</p> <p>Mechanism for recording incidents is developed</p>	Reviewed annually 2023-24	Key facts of tobacco industry influences from Fresh presentation delivered on the strategy day and shared amongst partners.

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6.1 Appendix 3

	partners to ensure a consistent approach					
Ensure there is continued vigilance around the tobacco industry and frontline groups and that we adhere to Article 5.3 as set out within the framework Convention on Tobacco Control (FCTC)	Share updates amongst partners and front line services. Deliver a dedicated session on tobacco influences	Alliance & Fresh	National, regional & local	Partners have increased knowledge. Incidents are shared amongst partners for awareness	Reviewed Annually 2023-24	
Identify and share local case studies on action on tobacco and encourage the sharing of “real people” stories to bring to life the human side of tobacco control.	Develop Template for detailing case studies. Case studies shared as part of Tobacco Control Alliance agenda Invite community reps to Tobacco Alliance meetings to share their lived experiences	Alliance	local	Case study portfolio collected across service provision. Numbers of people with lived experience attending events	April 2024	
Identify and support locality champions to support the delivery of key tobacco advocacy priorities	Partners to identify local reps to participate in the Making smoking history forums.	Alliance/ Fresh	Local/ regional	Good practice shared and service quality improves Numbers of representatives from Hartlepool attending regional Making Smoking History Champions Forum	September 2023 and reviewed quarterly	Invites shared for September 27 th Champions Forum Event
Priority 3. Reducing exposure to tobacco smoke and normalising smokefree environments						
	How	Who	Regional/Local	Outcome	Timescales/RAG	Comments

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Develop a locality strategic approach to reducing exposure to tobacco smoke and normalising smoke free environments using briefings and support from Fresh.	Develop a new plan for smoke free places, particular around young people, for example - <ul style="list-style-type: none"> Schools Parks Sports clubs Work places . 	Alliance / fresh	Local / regional	Locality smoke free plan agreed for delivery by partners Reduction in exposure to second hand smoke identified in key environments	January – April 2023	
Share training resources and campaign materials on the dangers of second hand smoke with Hartlepool Tobacco Alliance for use by frontline staff to deliver standardised messages.	As part of Alliance communications strategy – Resources will be shared in the locality. Dates agreed for coordinated approach to deliver campaigns	Fresh, Alliance partners, wider communities & work places	Regional / local	Standardised materials accessed by partners Coordinated approach to campaigns delivered across localities.	Reviewed annually 2023-24	Planning commenced for Stoptober activities
Work with partners to ensure workplace policies on smoking are up to date and they recognise Vaping as a means to help smokers quit.	Work with partners to review smoking policies are up to date and reflect evidence based practice for supporting stopping smoking Identify areas of good practice and share with partners and workplaces.	PH BHAWA lead, Alliance partners. ? Regeneration Team/ business forums	local	Increased numbers of places with effective up to date work place policies. Reduction of smoking in the work place Increased support/opportunities for people wanting to stop smoking Increased campaign promoting stop smoking support in workplaces	2023-2024	

				monitored through the BHAWA		
Utilise the Better Health at Work Award (BHAWA) framework to ensure the effectiveness of their smoke free policies and share training resources on the dangers of second hand smoke.	Engage with workplaces as part of BHAWA framework to review and audit current work place polices around smoking/vaping. Share resources and good practice approaches to tackle second hand smoke in the work place. Share information about stop smoking support across Hartlepool Identify proposals to develop a workplace stop smoking support offer	PH lead for BHAWA & work places	local	Increased numbers of work places with effective smoke free policies. Increased support/opportunities for people wanting to stop smoking Increased campaign promoting stop smoking support in workplaces monitored through the BHAWA Workplaces in the locality will be smoke free	2023-2024	
Priority 4. Year round, media communications and education						
	How	Who	Regional/Local	Outcome	Timescales/RAG	Comments
Include communications as a key part of the Alliance utilising support from Fresh to inform the development of a coordinated local communication plan.	Host a specialist communication session for partners supported by Fresh Work with Tobacco Alliance partners to	Comms rep for alliance / alliance & public health	Local/ regional	Specialist comms session delivered with local input. Communications strategy with action plan agreed	August – April 2024	Comms lead identified to attend alliance meetings.

	<p>develop a communications strategy.</p> <p>Agree a communications plan across Hartlepool</p>			<p>Standardised material used.</p> <p>Regular campaigns delivered across locality partners.</p> <p>Newsletter developed sharing service updates and good news stories.</p>		
<p>Organise themed discussions for locality partners, with support from Fresh to map and develop communication channels which will amplify regional campaigns by ensuring that toolkits are shared with partners and local messaging mirrors that of mass media campaigns.</p>	<p>Link with Fresh to hold a themed session on communication to promote awareness of tool kits available</p> <p>Map existing local communication methods to identify development opportunities for new communication channels.</p> <p>Develop a communication strategy and action plan for delivering messages that mirrors national mass media campaigns.</p>	<p>Public Health, alliance partner's & Fresh</p>	<p>Local / regional</p>	<p>Local communication strategy and action plan developed</p> <p>Communications messages promoted through a variety of channels</p> <p>Local communications, campaigns mirror mass media campaigns.</p>	<p>August – April 2024 review annually</p>	<p>Themed session, supported by Fresh arranged in August for partners</p>
<p>Ensure the Fresh campaign website www.freshquit.co.uk to be included in all relevant public facing communications.</p>	<p>Include www.freshquit.co.uk is shared for public information.</p>	<p>Communication lead & Alliance</p>	<p>local</p>	<p>All communications will include www.freshquit.co.uk</p>	<p>Reviewed annually 2023-24</p>	

<p>Provide clear guidance to professionals and public on the use of e-cigarettes/vapes including:</p> <ul style="list-style-type: none"> • Use of e-cigarettes/vapes as an approved harm reduction technique for adults who are current smokers • The potential risk of continued nicotine addiction. • Advice and information relating to the use of vapes in children and young people. 	<p>Support partners in the use of tool kits, share latest reports and evidence for wider dissemination regarding vaping.</p> <p>Hold specialist sessions on vaping for all partners.</p> <p>Share link with partners and recommend further learning by accessing on line specialist modules on vaping available at the National Centre for Smoking Cessation and Training (NCSCT)</p> <p>Share specific resources with education and youth settings and look at providing dedicated sessions for schools and identifying additional support needs</p>	<p>Alliance partners Fresh</p>	<p>Local, regional & national</p>	<p>Numbers of people accessing themed sessions</p> <p>Register kept of training accessed and completed</p> <p>Audit of current school support and support plan agreed</p>	<p>Reviewed annually 2023 - 2024</p>	<p>Learning resources and tool kits shared to all schools / youth services/ 0-19 services on Children and young g people vaping (March 23 & July23) .</p> <p>Meeting organised with Head Teachers to agree priorities for schools re: vaping</p> <p>Strong attendance by partners at vaping session (25 attendance)</p> <p>Register developed. NCSCT training links shared with Alliance partners April 2023.</p> <p>Training links sent to social prescribers – Hartlepool</p>
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						Clinical networks and hospital waiting well team – August 2023
Provide topic specific training sessions for professionals.	<p>Agree sessions for specific areas, utilising expert support to deliver for example</p> <ul style="list-style-type: none"> • Vaping • Communications • Illicit tobacco 	Tobacco Control Alliance & fresh	Local & regional	<p>Sessions delivered – face to face & remote</p> <p>numbers attending sessions</p> <p>Numbers of sessions delivered annually</p>	Reviewed annually 2023-24	
Provide professionals across the locality system access to online training to support behaviour change from the National Centre for Smoking Cessation and Training (NCSCT). This includes core competencies required to support a quit attempt	<p>Share NCSCT on line training link, stating it is as a mandatory required baseline for providers delivering support to stop smoking.</p> <p>As part of SLA with partners, maintain register of training accessed – baseline and specialist modules</p>	<p>Tobacco Control Alliance</p> <p>All partners providing stop smoking support</p>	National & local	<p>All staff providing stop smoking support have completed NCSCT on line training</p> <p>Register of staff who have completed the training maintained</p>	Reviewed Annually 2023-24	NCSCT training link shared amongst alliance members. Register of staff who have completed training developed
Agree an events calendar and deliver year round media and communications, to help to motivate smokers to stop and also to stay stopped.	<p>Agree a calendar of events as part of the Tobacco control communication strategy.</p> <p>Use different communication channels</p>	Tobacco Control Alliance	local	<p>Calendar of events promoted across partners.</p> <p>Resources shared, using accessible</p>	August -April 2024 communication plan reviewed annually.	Planning and resources shared for Stoptober

	to maximise reach to motivate smokers to stop and stay stopped. Plan and distribute campaign materials whilst engaging with local communities,			methods for different groups Case histories, photographs, filming of events used to capture and share successes.		
Ensure that key pieces of work, including locality media campaigns, are evaluated as appropriate and learnings are implemented to improve delivery in the future	Fresh to share campaign evaluations quarterly as part of their quarterly reporting	Fresh	Local/ regional	Quarterly report from Fresh shared with Alliance	Quarterly	

Priority 5. Supporting smokers to stop and stay stopped and also to reduce harm

	How	Who	Regional/Local	Outcome	Timescales/RAG	Comments
<p>Develop services that target those most at risk and focus our support on priority groups not already supported by existing NHS pathways.</p> <p>Target work to support those with smoking related conditions particularly in relation to cancers, cardio vascular disease (CVD) and chronic obstructive pulmonary disease (COPD)</p> <p>Work to continue the decline in the proportion of smokers in routine and manual occupations in Hartlepool.</p>	<p>Using the needs assessment to identify those groups most at risk to target resources/ service developments.</p> <p>Develop a support offer of 4 week vape kit and behavioural support to targeted groups –</p> <ul style="list-style-type: none"> Patients who live in the top 1-3 IMD areas , are eligible for a NHS health check and smoke Patients who are part of a lung health pilot within a GP surgery 	Public health, alliance	local	<p>Resources targeted at service gaps not covered by current service pathways for stop smoking support.</p> <p>Vape pilot offer developed and active from 1st August to targeted groups.</p> <p>Swap to stop pathfinder project commenced 2023</p> <p>Reduction of smoking in groups most at risk</p>	Offer to be developed throughout 2023-2024	<p>Vape pilot commenced August 2023</p> <p>Pathfinder proposal submitted July 2023 awaiting confirmation of start data</p>

<p>Work with colleagues delivering the maternity pathway to look at how we provide ongoing support to new mothers, partners and their families to ensure they are given continued support to stop and remain stopped following delivery. Develop a stop smoking offer for people who access substance misuse services</p>	<ul style="list-style-type: none"> Patients who are part of the waiting well pilot, awaiting elective surgery. <p>Be part of the national pathfinder for the Vape Swop to Stop project. At risk groups identified for priority support include -</p> <ul style="list-style-type: none"> 0-19 service (adult offer) to support the maternal pathway People who access substance misuse services People who access housing provision. People with a diagnosed mental health illness in the community. People accessing primary care. HBC staff <p>Analyse data/information from targeted areas for key learning to inform future planning of services and opportunities</p>			<p>Increased provision of support for people wanting to stop smoking including vape offer</p> <p>Increase in the numbers of quit attempts</p> <p>Increase in numbers of people achieving 4 week quit attempt</p> <p>Numbers of people achieving quit at 12 week review</p>		
<p>Communicate the evidence base for vaping and help facilitate discussions and understanding around this with local partners</p>	<p>Ask partners to use shared Fresh publications/ resources and links to</p>	<p>Public Health, alliance, Fresh</p>	<p>Regional & local</p>	<p>Increased sharing of Vape resources and training materials shared.</p>	<p>August – April 2024</p>	<p>Feedback from partners on vaping resources have been</p>

using resources and support form Fresh.	NCSCT specialist vaping modules. Invite partners to Vaping themed sessions with Fresh supporting			Dedicated Vaping session held for partners. Dedicated work to look at supporting schools and youth settings		positive. (youth groups and education) Meeting scheduled with Head Teachers
Encourage all partners to adopt an evidence based approach to vaping and cascade approved resources aligned with regional position statement(s) and key messages	Partners to use shared Fresh publications/ resources and links to NCSCT specialist vaping modules.	Public health, alliance and Fresh	National, regional & local	Vaping resources and training materials shared.	Reviewed annually 2023-24	
Priority 6. Raise price and reduce illicit trade						
	How	Who	Regional /local	Outcome	Timescales/RAG	Comments
Develop an illicit tobacco plan with partners to coordinate action using the 8 key strand for addressing illicit tobacco (enforcement of underage sales, illicit tobacco) http://www.illicit-tobacco.co.uk/strategicframework/index.html .	Partners to attend specialist session on illicit tobacco to raise awareness of the issue Work with trading standards colleagues and wider partners to assess needs and gaps and develop an action plan to tackle illicit tobacco in Hartlepool including licensing processes	Trading standards, public health, alliance	Local	Specialist session held facilitated by Fresh and local enforcement team. Illicit tobacco plan developed monitored by Tobacco Control alliance Review of licensing processes to look at illicit tobacco/vape use	2023-24	Illicit tobacco session planned for October 17 th 2023

Use local data to target activity in geographical areas as well as population groups, e.g. using data to target illicit tobacco supply, illegal tobacco sales and high smoking prevalence. Provide support to trading standards colleagues' in partnership with Fresh to inform their approaches to addressing illicit trade.	Gather data, local intelligence with trading standards colleagues and wider partners including licensing processes Agree areas to target activity to address illicit tobacco as part of the illicit tobacco plan for Hartlepool	Trading standards, public health, alliance partners (police)	Local	Activity targeted at specific population groups and geographical areas. Activity data monitored for reoccurrence of illicit trading Number of representations made in licensing process	2023-24	
Deliver a dedicated themed session for the Alliance around illicit tobacco use.	Work with Fresh to develop a session about illicit tobacco	Public Health, Fresh & Trading standards	Regional & local	Illicit tobacco session	October 2023 reviewed annually	Vaping session last month highlighted the need for a separate session on illicit tobacco -
Support the work of Fresh and ASH to recommend that Government toughen vape regulation.	Fresh information and support requests shared with Tobacco Control Alliance	Tobacco control alliance	Regional and local	Local input into national consultation and guidance	Reviewed Annually 2023-24	
Priority 7. Tobacco and nicotine regulation including reducing tobacco promotion						
	How	Who	Regional/ local	Outcome	Timescales/RAG	Comments
Work with Licensing/Trading Standard to ensure ongoing compliance monitoring around all tobacco regulations as well as age of sale, proxy purchasing and point of sale displays.	Public health to use a standard operation procedure to support licencing / trading standards departments	Public health, trading standards / licensing	Local	Support given to licensing / trading standards to ensure compliance of all tobacco regulations	August - April 2024	Licensing SOP developed for alcohol license applications to be reviewed in terms of illicit

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

6.1 Appendix 3

	with licensing and illicit tobacco compliance			through licensing process		tobacco and vape regulations
Share compliance monitoring data, outlining trends and risks and maintain effective links with regulatory colleagues, providing advice and guidance to partners and working collaboratively to share best practice.	Trading Standard representative to share compliance / monitoring data at quarterly alliance meetings	Trading standards Tobacco Control alliance	local	<p>Awareness of local issues amongst partners.</p> <p>Agreement tackle issues collaboratively using best practice.</p> <p>Compliance of Tobacco regulations increase s across the locality.</p>	August – April 2024	Licensing SOP developed for alcohol license applications to be reviewed in terms of illicit tobacco and vape regulations
Ensure local attendance of public health and regulatory representatives to the six monthly online Fresh Tobacco Crime and Regulation Forum meetings where regulatory issues are discussed and best practice shared.	Trading standards Tobacco Alliance rep to attend forums	trading standards / Tobacco Control Alliance	Regional & Local	Trading Standards rep to feedback to Alliance meetings -	Reviewed annually	
Alert Trading Standards and Fresh if situations arise where involvement of tobacco companies maybe suspected.	Process developed and agreed by Tobacco control alliance members for alerting involvement of tobacco companies.	Fresh, Trading standards & Alliance	Regional & local	<p>Process used by Tobacco Control Alliance members to escalate situations where involvement of tobacco companies maybe suspected.</p> <p>A register of notifications will be kept to monitor trends / risks.</p>	2023-24	

Priority 8. Data research and public opinion						
	How	Who	Regional/ local	Outcome	Timescales/RAG	Comments
Use clearly defined data to ensure we are using targeted approaches to address health inequalities	Data from needs assessment, inequalities data, and local data is used to identify approaches for service provision..	Public Health, Public Health data analyst, Tobacco Control Alliance, OHID	Local / regional / national	<p>Increased support offer including vapes</p> <p>Increased targeting of services at to reduce inequalities</p> <p>Decrease in the numbers of people smoking</p> <p>Increase in numbers starting a quit attempt</p>	2023 – 2024 to inform service delivery	Review offers and support following implementation of vape pilot and national pathfinder project
<p>Use qualitative insight work led by Fresh on attitudes towards tobacco, with a particular focus on exploring motivations for behaviour change, to inform local campaign development. This will also include understanding the needs of people who smoke and routes and barriers to quitting.</p> <p>Utilise findings from public opinion surveys, which monitor behaviours, attitudes, policy support linked to Tobacco to inform local campaigns.</p>	<p>Share insight findings with Tobacco Control alliance from Fresh to shape campaign development and delivery of messages.</p> <p>Share public opinion surveys and intelligence linked to tobacco behaviours. Ask Tobacco control alliance partners to consider the findings when planning events / campaigns.</p>	Fresh, Tobacco Control Alliance and community champions	Local/ regional	<p>Tobacco Control Alliance members will use the findings to develop and target messages as part of public facing campaigns as part of the communication plan.</p> <p>Campaigns will be delivered using recommendations for greatest reach, understanding and engagement.</p>	2023-24	

	Share local insights / intelligence from service user provision, local campaign evaluations and community champions to contribute to planning of campaigns.			Campaigns will be delivered at appropriate times, settings and be accessible for all.		
Work with Fresh to share key pieces of research on a broad range of topics with local partner's and also work collaboratively with key academics on the evaluation of the delivery of stop smoking support	Look for research funding opportunities to work with academics to understand the barriers and facilitators and service model for stop smoking support to maximise engagement and impact on smoking habits,	Fresh, Public Health Tobacco Control alliance	Local , regional , national	<p>Research funding secured to develop a research study to understand barriers, facilitators and a service model for stop smoking support in Hartlepool.</p> <p>Findings from the study will inform future service development.</p> <p>Service provision shows an increase in numbers of those accessing support to stop smoking.</p>	2024-2025	
Work with education and youth service colleagues to better understand the numbers of young people who smoke/vape to inform approaches and interventions using	Audit schools using school based questionnaires to understand the numbers of young people who smoke / vape. Extend to youth groups	Education, trading standards, Smoking Alliance	Local/ regional	<p>Data reports show the numbers of young people taking up smoking / vaping.</p> <p>Analysis of questionnaires to be</p>	August – April 2024	Work with schools to encourage they responses to audit

evidenced based approaches and resources.	<p>Share Fresh toolkits and resources about young people and vaping / smoking.</p> <p>Develop an audit to understand the use of the toolkits within schools and youth settings. Sharing recommendations for future developments.</p> <p>Work with education settings and youth settings to understand the needs and support required</p>			<p>shared with Tobacco Control Alliance and support action plan developed.</p> <p>Tool kits shared March and July to schools and youth settings.</p> <p>Analysis will detail experiences and recommendations for future resources targeting schools and youth groups around vaping / smoking.</p>		<p>Meetings organised with Head Teachers – September to discuss opportunities</p> <p>Feedback from Youth Groups positive in using the tool kit with youth groups across Hartlepool</p>
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1. Is this decision a Budget & Policy Framework or Key Decision? YES If YES please answer question 2 below				
2. Will there be an impact of the decision requested in respect of Child and Family Poverty? YES If YES please complete the matrix below				
GROUP	POSITIVE IMPACT	NEGATIVE IMPACT	NO IMPACT	REASON & EVIDENCE
Young working people aged 18 - 21	x			The smoking needs assessment identified the numbers of young people who are believed to be smoking and/or using vapes across Hartlepool. The strategy has set out priorities in relation to the needs of children and young people both to reduce the impact of second hand smoke to support them and people who work with them to provide stop smoking support.
Those who are disabled or suffer from illness / mental illness	x			The strategy specifically makes the link between mental illness and smoking and the strategy has identified particular vulnerable groups who we will be supporting to stop smoking
Those with low educational attainment			x	Not directly however a proportion of the population as identified within the needs assessment will have low educational attainment
Those who are unemployed			x	Not directly however a proportion of the population as identified within the needs assessment will be unemployed
Those who are underemployed			x	As above
Children born into families in poverty			x	Although this strategy will no directly impact on this group, children born into poverty will be a group impacted by smoking. The needs assessment identified areas in Hartlepool linking deprivation to other factors like substance misuse.
Those who find difficulty in managing their finances			x	No impact

Poverty Impact Assessment

6.1 Appendix 4

Lone parents			x	Not directly, but the needs assessment identifies children and young people who currently live with a lone parent.
Those from minority ethnic backgrounds			x	Not directly however the needs assessment identifies the low numbers of minority ethnic groups in Hartlepool. (although the population of minority ethnic groups in Hartlepool is also low)

Poverty is measured in different ways. Will the policy / decision have an impact on child and family poverty and in what way?

[illegible]

Examples of Indicators that impact of Child and Family Poverty.
Economic
Children in Low Income Families (%)
Children in Working Households (%)
Overall employment rate (%)
Proportion of young people who are NEET
Adults with Learning difficulties in employment
Education
Free School meals attainment gap (key stage 2 and key stage 4)
Gap in progression to higher education FSM / Non FSM
Achievement gap between disadvantaged pupils and all pupils (key stage 2 and key stage 4)
Housing
Average time taken to process Housing Benefit / Council tax benefit claims
Number of affordable homes built
Health
Prevalence of underweight children in reception year
Prevalence of obese children in reception year
Prevalence of underweight children in year 6
Prevalence of obese children in reception year 6
Life expectancy

Equality Impact Assessment Form

Department	Division	Section	Owner/Officer
Children and Joint Commissioning Services	Public Health		Craig Blundred
Service, policy, practice being reviewed/changed or planned	Development of a Tobacco Control Strategy		
Why are you making the change?	Strategy being implemented to coordinate the work to reduce the harms associated smoking and second hand smoke		
How might this impact (positively/negatively) on people who share protected characteristics?			
Please tick		POSITIVELY	NEGATIVELY
Age		<input checked="" type="checkbox"/>	
<i>The strategy is an all age strategy and has identified the needs of particular at risk groups including: pregnant women, children and young people who are exposed to second-hand smoke/smoke or are at greater risk due to parental smoking. Those with comorbidities have also been identified as a priority group within the strategy</i>			
Disability		<input checked="" type="checkbox"/>	
<i>Many of the people who smoke have long term health issues supporting these people to stop smoking has been identified as a priority within the strategy.</i>			
Gender Re-assignment		<input checked="" type="checkbox"/>	
<i>This is not a group identified within the strategy however anyone who requires support in relation to stopping smoking will be supported within the strategy</i>			
Race		<input checked="" type="checkbox"/>	
<i>This is not a group identified within the strategy however anyone who requires support in relation to stopping smoking will be supported within the strategy</i>			
Religion		<input checked="" type="checkbox"/>	
<i>This is not a group identified within the strategy however anyone who requires support in relation to stopping smoking will be supported within the strategy</i>			
Gender		<input checked="" type="checkbox"/>	
<i>From the needs assessment we have identified the proportion of women and who smoke and interventions and support will be targeted at particular at risk groups due to age/gender based on the data within the needs assessment.</i>			
Sexual Orientation		<input checked="" type="checkbox"/>	
<i>This is not a group identified within the strategy however anyone who requires support in relation to stopping smoking will be supported within the strategy</i>			
Marriage & Civil Partnership		<input checked="" type="checkbox"/>	
<i>This is not a group identified within the strategy however anyone who requires support in relation to stopping smoking will be supported within the strategy</i>			
Pregnancy & Maternity		<input checked="" type="checkbox"/>	
<i>This is a group identified within the strategy and support is currently provided through maternal NHS pathways. We will work with providers to ensure this groups are a key priority within the strategy.</i>			

Has there been consultation /is consultation planned with people who will be affected by this policy? How has this affected your decision making?		The development of the strategy has been developed following a consultation event and engagement with a range of services across Hartlepool. We are also working with Fresh who support us directly in making sure people who are affected are involved in the work we are undertaking as part of this strategy.	
As a result of your decision how can you mitigate negative/maximise positive outcomes and foster good relationships?		The draft strategy will inform the development of an action plan which will set out under each theme the detail of how we will deliver this priority area, who will deliver, timescales and be informed by indicators in order to measure success through an outcome framework. Governance of the strategy implementation will be through the Tobacco Control Alliance chaired by Public Health and will be a partnership approach.	
Describe how you will address and monitor the impact		1. No Impact - No Major Change <i>Please Detail</i>	
		2. Adjust/Change Policy <i>Please Detail</i>	
		3. Adverse Impact but Continue as is <i>Please Detail</i>	
		4. Stop/Remove Policy/Proposal <i>Please Detail</i>	
Initial Assessment	00/00/00	Reviewed	00/00/00
Completed	00/00/00	Published	00/00/00

FINANCE AND POLICY COMMITTEE**18 SEPTEMBER 2023****Subject:** HIGHLIGHT LEISURE FACILITY**Report of:** Executive Director of Adult and Community Based Services and
Director of Finance, IT and Digital.**Decision Type:** Key Decision Test I and II – General Exception Notice Applies**1. COUNCIL PLAN PRIORITY**

Hartlepool will be a place
- where people are enabled to live healthy, independent and prosperous lives.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.

2. PURPOSE OF REPORT

- 2.1 This report provides Members with an update on the proposed development of the Highlight leisure and wellbeing facility and seeks support for the proposed funding strategy.

3. BACKGROUND AND STRATEGIC CASE FOR INVESTMENT

- 3.1 A Leisure Facilities Review and Options Appraisal was presented to Finance and Policy Committee in January 2020 which considered various options available to the Council in relation to future leisure provision. One of the key recommendations was to invest in the replacement of Mill House Leisure Centre, which is no longer fit for purpose. The appraisal drew from the recommendations of the Indoor Facilities & Playing Pitch Strategy (IFPPS) 2019.

- 3.2 Options included the refurbishment of Mill House Leisure Centre alongside other new build opportunities in various locations in Hartlepool. The option to refurbish Mill House Leisure Centre scored lowest against the strategic criteria used to assess each option. There was significant risk to refurbishment including: limited opportunities to amend the existing footprint and configuration without considerable costs; partial or full closure of the facility during refurbishment having a significant impact on revenue and customer retention; limited value for money due to the structure remaining 50 years old; limited economic impact and appeal to visitors outside of Hartlepool; limited integration into a wider customer experience of leisure, culture, heritage and environment; limited access to investment as monies secured for strategic leisure development would not be secured against refurbishment due to the limited opportunity of impact and outcomes and limited ability to integrated more sustainable and efficient operations.
- 3.3 The decision to progress with this development was subsequently made by Finance and Policy Committee with a recommendation that the development of a new leisure centre (latterly named Highlight) be integrated as part of the wider Hartlepool waterfront development.
- 3.4 A robust and comprehensive strategic case for investment in Highlight has been developed over a number of years, dovetailing the findings of the IFPPS and findings / recommendations from the application of Sport England's Strategic Outcomes Planning Model (SOPM: 2021/22).

In headline terms, the strategic case for investment is based upon:

- an urgent need to address the aging and poor quality sport and leisure facility stock;
- reduced swimming pool capacity due to the closure of small, school pools;
- significant concern regarding the potential further loss of swimming pool capacity given the age and condition of Mill House Leisure Centre and High Tunstall School pools – the town's only public water spaces;
- the modelled and evidenced community and strategic need for aquatics, fitness provision (i.e. gym and fitness classes), play opportunities and family-focussed activity;
- a detailed understanding of the wider socio-economic challenges facing local communities (i.e. high levels of adult & childhood obesity, physical inactivity, cardio-vascular disease, mental ill-health, muscular-skeletal problems and social isolation) and the positive impact that an active lifestyle can have in addressing or mitigating all of these issues;
- evidenced policy, strategy and delivery support from all local, related public and voluntary sector partners (i.e. health, education, regeneration, housing, tourism) at community and regional strategy level, collectively advocating the value and beneficial impact that investment in sport and physical activity (and in Highlight) can have on the wellbeing of local people and in addressing wider social outcomes, including social cohesion, employment, mental well-being, inward investment and educational attainment

The strength and clarity of the case made for investment in Highlight and its potential to positively impact on local communities is reflected in the significant capital investment secured from both Tees Valley Combined Authority and Sport England.

4. PROJECT DEVELOPMENT

4.1 It was agreed that the following approval arrangements were adopted:

- *Stage 1* – Approval of indicative budget allocations for individual projects;
- *Stage 2* – Development of detailed schemes and business case to RIBA 3 (Spatial Coordination). This stage defines the detailed project specification to enable the Council to undertake the appropriate tendering/procurement exercise;
- *Stage 3* – Acceptance of tenders. If contract costs are within the budget limit approved at Stage 2 the project will be progressed to the delivery stage. However if contract costs exceed the indicative budget allocation, or external grant funding cannot be secured, an additional report will be submitted to Finance and Policy Committee to determine a strategy for managing this position; and
- *Stage 4* – Project delivery.

4.2 Subsequent work in relation to the above arrangements has taken place, with Stage 2 fully complete.

4.3 As per the requirements of Stage 1, an indicative budget was developed and approved. The total budget is split into three parts to represent the development of the leisure facility, infrastructure works and public realm.

Funding Stream	Value
Highlight Leisure Facility	
TVCA Capital Programme	£10.490m
TVCA IGF	£0.500m
Prudential Borrowing	£8.400m
External Grant	£2.000m
Infrastructure Works	
TVCA Capital Programme	£2.260m
Public Realm	
TVCA IGF	£2.000m
Total	£25.650m

5. PROPOSALS / OPTIONS FOR CONSIDERATION

5.1 During the period January 2021 to July 2022, the project has progressed through a number of milestones with the project now fully developed to

Technical Design. This level of information is sufficient to obtain a fixed price tender for the delivery of the construction phase of the project.

- 5.2 Following Planning Permission for the development being granted in July 2022, the procurement exercise to identify a Main Contractor commenced. Unfortunately, due to a number of factors outside the Council's control, the procurement phase has taken longer than initially programmed and has also been amended to take into consideration the current conditions of the construction market which have evolved significantly post COVID-19.
- 5.3 The tender process robustly considered regional and national contractors in order to identify the most appropriate contractor to deliver this project. The early part of 2023 saw two large regional contractors with significant leisure centre experience go into liquidation which caused extensive uncertainty in the market, particularly in the North East. This led to an unavoidable delay while the project team considered alternative approaches to procuring a suitably experienced contractor.
- 5.4 Following a competitive procurement process, Wates Construction, a leader in the sport and leisure sector nationally, were identified as the preferred contractor to progress the development. Whilst Wates are a tier 1 national contractor they have engaged the local supply chain for delivery of this project. Wates were appointed under a Pre-Construction Services Agreement (PCSA) whereby they become part of the project team to develop the final design, resulting in them being able to provide a fixed price tender for the delivery of the construction phase of the development. Wates Construction have extensive experience in leisure centre construction and were the principal contractor for the state-of-the-art facility that was purposely built for the Birmingham 2022 Commonwealth Games.
- 5.5 The PCSA process was completed in July 2023 with Wates submitting a fixed price tender alongside a list of 'Value Engineering' options, a pre-construction programme and a construction programme. The tender submission had four potential prices depending on the amount of Value Engineering proposals accepted. Value Engineering is a process of refining the build process and specification to drive out value through design, as opposed to removing elements from the development. Wates have brought their extensive construction experience to the project through the PCSA, which has added further value.
- 5.6 The tender range is presented in table one below:

Tender Option	Total Cost
Low (all value engineering options accepted)	£29.930m
Medium (majority value engineering options accepted)	£30.000m
High (30% of value engineering options accepted)	£30.650m
Very High (No value engineering options accepted)	£30.940m

- 5.7 The tender submission in the instance that no value engineering is achieved is £30.940m, however the most likely figure is £30m as this provides value

engineering without being detrimental to the original specification. All costs are inclusive of the external areas to provide activity space, public realm, car parking facilities etc.

- 5.8 The pre-construction and construction phase programmes have been fully developed and it is anticipated that works on site can commence (subject to approval) in autumn 2023, with a programmed completion date of summer 2025.
- 5.9 Additional costs of £2.790m arise in addition to main construction costs:
- A budget of £0.600m is required for internal fixtures and fit out;
 - Off-site highway improvements, quay wall repairs, legal and planning fees to support the project total £0.580m;
 - Professional fees, which include design to date and project management to completion, total a further £1.610m.
- 5.10 It is recommended that the Council creates a contingency pot of £1.860m to cover any unexpected risks that arise as construction commences, which is standard practice for construction projects of this size.
- 5.11 Therefore the proposed facility, based on the medium case scenario being achieved through value engineering and including the offsite ancillary works are as follows:

Element	Value
Highlight Tender Sum (medium case)	£30.000m
Additional Project Costs	£2.790m
Risk/Contingency	£1.860m
Total	£34.650m

- 5.12 When taking into consideration the total anticipated costs, there is therefore a budget shortfall of £9m.
- 5.13 The facility mix and foot print of the new strategic leisure development has been developed with a robust evidence base working closely with Sport England and other national leisure and sport experts. The facility mix ensures achievement of the priority outcomes linked to participation, wider determinants of health (including working with the NHS Foundation Trust), attainment of young people swimming 25m as part of Ofsted requirements and ensuring an attractive offer for visitors amongst many other outcomes.
- 5.14 Rationalisation of the offer within the strategic leisure centre creates significant risk against the outcomes, business model and revenue projections compared to the one off capital investment it would save. Any changes to the proposed leisure facility at this stage would incur significant additional costs attached to design and other feasibility work as well as adding further delay and risk of continued inflation increasing the overall costs.
- 5.15 It should be noted that the original budget for the project was developed in 2019/20. Since that time, inflation, energy costs and other factor have had a

huge impact upon the whole of the UK, including the construction market. Following extensive research to understand the regional construction market, these costs do not appear to be abnormal with a number of other high profile projects being subject to similar pressures. Although the additional investment is significant, this development will have major long term benefits for Hartlepool, demonstrating the Council's commitment to regenerating the town, raising aspirations and supporting improved health outcomes for local people.

- 5.16 Delivering Highlight is fundamental to the wider Waterfront Regeneration Master Plan and delivery of the Council Plan ambitions for the town. A strategic leisure facility on the waterfront is the first step towards creating a destination attractive to residents, visitors and investors combining leisure, culture, heritage, business, retail, hospitality and environment.

6. RISK IMPLICATIONS

- 6.1 Having inadequate leisure provision in Hartlepool, especially as a coastal town, has significant population wide risk implications. This includes but is not limited to poor swimming attainment for children and young people, low rates of physical activity and increased risk of long terms health conditions.
- 6.2 Mill House Leisure Centre is no longer fit for purpose and requires significant investment to continue operating at the current standard. For the reasons outlined in 3.2 continued investment into the existing facility is seen as abortive and any early closure of part of the facility pending a new facility will have an impact on ongoing revenue budgets.
- 6.3 Not progressing with Highlight at this stage would risk loss of time and money already invested, potential loss of Sport England funding, impact on other grant conditions from TVCA and reputational damage based on the significant level of stakeholder and public support for the development of this facility.

7. FINANCIAL CONSIDERATIONS

- 7.1 A significant amount of work has been undertaken by officers to develop a revised funding strategy to address the budget shortfall as set out below.

	Gap / Funding £000
Increased Grant Funding	
The project has been developed through close collaboration with Sport England and due to the strength of the project, further grant funding of £0.500m has been indicatively agreed in addition to the original allocation of £2.000m. Note that this funding is at risk until grant approvals are signed.	500

Use of Capital Contingencies	
Members will be aware from previous F&P reports that plans were in place to set aside a capital contingency for price risk on major capital schemes including Highlight. This was to be funded from temporary Minimum Revenue Provision (MRP) savings and capital receipts. Whilst achievement of capital receipts has proven challenging in the current environment, the existing contingency, coupled with forecast MRP savings until the centre is operational, can be released to support Highlight.	2,500
In-depth review of Capital Programme	
<p>The finance team, in conjunction with Directors and service teams have undertaken a root and branch review of the existing capital programme and capital funding allocations to identify a number of schemes that are either complete, obsolete, stalled for a significant time period, part of a wider scheme or simply no longer deliverable.</p> <p>Appendix 1 details these schemes. The funding sources of these schemes are mixed, including earmarked capital reserves, external funding and prudential borrowing. Excluding borrowing, freed up capital resources, can be used to support the Highlight scheme.</p>	1,500
Prudential Borrowing	
<p>It is proposed to bridge the budget gap through prudential borrowing. Based on current interest rates, the annual cost of borrowing (both MRP and interest) would be circa £0.280m a year. Note the review of the capital programme outlined above releases historic borrowing approvals.</p> <p>The actual interest cost will depend on the prevailing rates when borrowing is entered into.</p> <p>Given the timeframe of the project, the flexibility the council has of when to borrow, but also recognising potential interest rate risk, it is proposed to factor in a potential pressure of £0.100m per year over the 3-year MTFS period.</p> <p>It should be noted that the Council has a prudent approach to borrowing, with comparatively low servicing costs compared to other Local Authorities.</p>	4,500

- 7.2 Whilst a balanced funding strategy is fully in place, the Council will continue to seek additional sources of external funding, as well as examine potential flexibilities within existing funding as the capital programme develops and is implemented. Should new opportunities arise, this will mitigate the impact on the Council funding position, and will be reported as part of quarterly budget reports.

- 7.3 Business planning for Highlight continues to progress with early projections identifying a projected subsidy comparable to that of Mill House Leisure Centre with significantly greater output in terms of outcomes, participation and customer experience. Further work will include review of operating models for leisure and culture to ensure best value and impact on the recommended operating model for Highlight. This work builds upon the detail already presented to Adult & Community Based Services Committee as part of the Strategic Outcome Planning Model (January 2022).

8. OTHER CONSIDERATIONS

LEGAL CONSIDERATIONS	<p>A procurement exercise was undertaken to select Wates Construction to provide further design input, buildability advice, technical advice and detailed costs information. This allows for their appointment through to construction and mitigates legal risks by using industry standard contracts to minimize legal costs and apportion risks in a fair and 'industry accepted' manner.</p> <p>Funding agreements and business cases have already been completed and signed with funders and investors. Any changes to the heads of terms and deliverables could create risk that will need to be managed in the context of existing agreements and contracts.</p>
CHILD AND FAMILY POVERTY	<p>Physical activity, leisure and community engagement contribute to the health and wellbeing of the whole population, however the risks associated with physical inactivity, long term health conditions and lack of engagement in positive activities (including learning to swim) are typically higher amongst the most deprived communities.</p> <p>The development of a new strategic leisure facility will ensure improved engagement with communities and will have a positive impact on access to affordable leisure, play and activity provision. This supports the development of fundamental skills critical for the development of children and young people and preventing long terms risks to health and wellbeing.</p>
EQUALITY AND DIVERSITY CONSIDERATIONS	<p>Issues regarding equality and diversity have been considered throughout the development of the Highlight project, including engagement with the Community Led Inclusion Partnership (CLIP) regarding accessibility.</p>

	Linked to the funding contribution from Sport England there are some requirements to enhance accessibility of the facility in line with the Facility Planning Model.
STAFF CONSIDERATIONS	<p>The facility mix, configuration and operating model will require a review of staffing infrastructure to ensure Highlight is appropriately staffed in line with strategic objectives and ensuring safe operation.</p> <p>A staffing review will be conducted in advance of Highlight opening to ensure readiness of staff, a period of transition and ensure adequate training and development can be conducted. This work will be done with engagement from Human Resources and Trade Unions in line with corporate policy as required.</p>
ASSET MANAGEMENT CONSIDERATIONS	The relocation from Mill House Leisure Centre to a new state of the art facility will reduce the existing maintenance burden on the Council. Mill House Leisure Centre is no longer fit for purpose and as such requires a disproportionate amount of maintenance spend to keep it operational.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	A Building Research Establishment Environmental Assessment Methodology (BREEAM) has been used to inform the technical design. The aim of BREEAM is not only to identify a project's genuine sustainable credentials, but also to improve sustainability of a building throughout its whole life. BREEAM sets the standard for best practice in sustainable design and is internationally recognised as a measure used to describe a building's environmental performance. BREEAM assesses the performances of buildings over a wide range of environmental issues to produce a rating of either unclassified (<30% – non-compliant), pass (>30%), good (>45%), very good (>55%), excellent (>70%) or outstanding (>85%). The assessment undertaken on this project has identified that it should achieve a minimum rating of very good.
CONSULTATION	<p>Consultation and engagement has been ongoing involving customers, residents, stakeholders and investors. The development of the evidence base for a new strategic leisure centre started in 2017/18 when a review of Hartlepool's Playing Pitch and Indoor Facility Strategy (PPIFS) was started, and this concluded in 2019.</p> <p>Before this Hartlepool had been on a national strategic pipeline for leisure investment and development for a significant number of years due to the risk of decline of the existing leisure offer and projected trends in participation.</p>

	<p>Once the PPIFS was adopted further work to explore options and gain insight from the public and stakeholders was conducted as part of the option appraisal.</p> <p>Additional engagement work has been undertaken as part of the SOPM development, the design stages with architects GT3 and as part of ongoing service development during the evolution of Active Hartlepool.</p> <p>The public engagement through a broad range of methodologies has been positive especially combined with significant plans for regeneration of Hartlepool's waterfront and an opportunity to strategic align leisure, culture, heritage, environment and hospitality for the benefit of residents and visitors.</p>
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9. RECOMMENDATION

- 9.1 It is recommended that Members support the revised funding strategy for the Highlight Leisure Facility as set out in the report and make a recommendation to Council to approve the changes to the capital programme and the additional borrowing.

10. REASONS FOR RECOMMENDATION

- 10.1 To ensure that Hartlepool's proposed state of the art strategic leisure facility is delivered, and to enable work to start on site in autumn 2023.

11. BACKGROUND PAPERS

- 11.1 18 July 2019, Adoption Hartlepool Playing Pitch and Indoor Facility Strategy 2019 – 2024, Adults and Community Based Services Committee

30 January 2020, Leisure Facilities Review and Options Appraisal, Finance and Policy Committee

20 January 2022, Strategic Outcome Planning Model, Adults and Community Based Services

26 July 2022, Waterfront Regeneration Programme Business Case, Finance and Policy Committee

05 September 2023, Destination Management Plan, Economic and Regeneration Committee

12. CONTACT OFFICERS

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Sign Off:-

Managing Director	Date: 05 / 09 / 2023
Director of Finance, IT and Digital	Date: 05 / 09 / 2023
Director of Legal, Governance and HR	Date: 05 / 09 / 2023

Project Code	Scheme	£ ('000)	Comment
Major Regeneration Schemes			
7447	Headland Amphitheatre	171	Scheme complete and awaiting final account to be confirmed.
CIP	Mill House Demolition	500	Mill House Leisure Centre will be transferred to the HDC and as such any demolition costs will be met as part of any proposed site redevelopment.
-	CIP - Headland Sports Hall	200	Any essential works required to be funded from the Brierton Sports Complex scheme, as one leisure improvement scheme.
CIP	NIP Phase 2	500	Can be taken as a saving on public conveniences as alternative funding now secured to deliver improvements in tourism areas
Major Regeneration Schemes - Total		1,371	

Project Code	Scheme	£ ('000)	Comment
Adult and Community Based Services			
7234	Chronically Sick & Disabled Adaptations	144	Contribution no longer needed - Disabled Facilities Grant budget available for schemes
7212	Capital Grants to Residential/Nursing Care Homes	106	Balance available beyond current commitments
7218	Disabled Facility Grants	22	Non grant funded element available to release.
8108	Centre for Independent Living	96	Scheme complete. Some funding retained for sinking fund
7543	Waverley Terrace Allotments - Car Park	12	Scheme complete - balance available
7483	Grayfields - Reinststate 3G Pitch	8	Scheme complete - balance available
7483	Grayfields - Asset Transfer Contingency	100	Historic Funding - balance available
8103	Swimming Scheme	35	Historic Funding - No longer progressing
8408	Mill House Equipment	3	Scheme complete - balance available
8409	Sport & Youth Improvement Work (Carlton IT infrastructure)	12	Historic Funding - No longer progressing
8634	Brierton 3G Pitch (Football Foundation)	5	Historic Funding - No longer progressing
8689	Brierton - Sport England	1	Scheme complete - balance available
8896	Brierton - Tennis Courts	30	Historic Funding - No longer progressing
Adult and Community Based Services - Total		574	

Project Code	Scheme	£ ('000)	Comment
Children's and Joint Commissioning Services			
8906	Brierton Campus Windows	17	Scheme complete - balance remaining
8218	Youth Service Portable MUGA	5	Scheme complete - balance remaining
Children's and Joint Commissioning Services		22	

Project Code	Scheme	£ ('000)	Comment
Corporate			
7072	Seaton Library DDA toilet	37	Scheme not progressing as has been superceeded by a wider scheme with grant funding secured.
7336	Borough Hall - Upgrade Fixtures and Fittings	8	Scheme complete - balance remaining
7539	Throston Youth Project - Resurface Car Park	63	Scheme not progressing - wider landlord improvements have been progressed.
7591	Mill House Capital	126	Scheme complete - balance remaining
7617	Borough Hall - Lighting and Wiring	38	Scheme not progressing - wider scheme in place
	Borough Hall - Major Refurb Works	45	Scheme not progressing - wider scheme in place
7623	IT Equipment	8	Scheme complete - balance remaining
Corporate Total		325	

Project Code	Scheme	£ ('000)	Comment
Resources and Development			
7260	City Challenge	9	Scheme complete - balance remaining
7623	Corporate IT Projects	12	Scheme complete - balance remaining
	Corporate Projects	109	Scheme complete - balance remaining
Resources and Development - Total		130	

Project Code	Scheme	£ ('000)	Comment
Neighbourhood and Regulatory Services			
HIFP	Additional Highways Schemes HIFP	332	The Highways Improvement Funding Programme was completed in 2020 and delivered all agreed schemes under budget focusing on carriageway resurfacing. Footpaths and verge schemes.
7347	NIP - CCTV in Parks	60	Scheme complete - balance available
8997	NIP - Unallocated	9	Scheme complete - balance available
Neighbourhood and Regulatory Services - Total		401	

OVERALL TOTAL TO BE RELEASED		2,823	
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FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: SALE OF GLADSTONE HOUSE
Report of: Executive Director of Development, Neighbourhoods and Regulatory Services
Decision Type: Key (CE 91/23)

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:

- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

- 2.1 The purpose of the report is to seek approval for the sale of Gladstone House, 46 Victoria Road, Hartlepool.

3. BACKGROUND

- 3.1 This report was originally due to be presented to Finance and Policy Committee in July 2023, however this was delayed as the previous sale proposals became abortive and therefore re-marketing was necessary.
- 3.2 Gladstone House was acquired by the Council in October 2016 for the purpose of providing accommodation for addiction rehabilitation services. Following the completion of various improvements and alterations, in April 2019 the property was let to the addiction treatment charity Addaction who were commissioned to run the service under the title "Stepping Stones". The property is shown hatched on the plan at **APPENDIX 1**.
- 3.3 Addaction wanted to develop a recovery community and base that provided support at Gladstone House. This took longer than they anticipated and the contract came to a natural end. Due to procurement rules the Council went

out to the market and tendered for the Substance Misuse Service. A different provider, Foundations, were successful in that tender process and they did not require the use of Gladstone House as they have a different service delivery model.

3. Following the termination of the Addaction lease in 2020 the property was considered for various other uses by both the Council and the NHS, however it was not thought to be suitable for any of them and therefore the property was placed on the market for sale and to let in September 2022 at an asking price of £160,000 and rent of £15,000 per annum.
- 3.5 Following interest from various parties and a number of offers that were rejected, an offer has been accepted, subject to contract and Committee approval for the sale of the freehold interest.

4. PROPOSALS/OPTIONS FOR CONSIDERATION

- 4.1 It is proposed that property is sold on the terms set out in **CONFIDENTIAL APPENDIX 2. 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, (paragraph 3) information relating to the financial or business affairs of any particular person (including the authority holding that information.**

5. FINANCIAL CONSIDERATIONS

- 5.1 The council previously set a capital receipts target to provide funding to offset the removal of Housing Market Renewal funding in 2011 by the Government. Owing to the continuing challenging economic and housing market conditions these capital receipts have taken longer to achieve than initially anticipated. The remaining target is £0.204m. The sale of the land will result in a capital receipt which will contribute to the capital receipts target.

6. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	There are no significant risk implications.
LEGAL CONSIDERATIONS	There are no significant legal considerations. The Council's Assistant Chief Solicitor will be instructed to complete the sale.
CHILD AND FAMILY POVERTY	No relevant issues.

EQUALITY AND DIVERSITY CONSIDERATIONS	No relevant issues.
STAFF CONSIDERATIONS	No relevant issues.
ASSET MANAGEMENT CONSIDERATIONS	The decision to take a commercial approach means that the Council should obtain full market value for any property it disposes of and should not pay any more than market value for acquisitions. The subject property has been fully marketed and the price to be achieved is considered to be Best Value.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No relevant issues.
CONSULTATION	None.

7. RECOMMENDATIONS

- 7.1 Committee is recommended to approve the sale on the terms set out in **CONFIDENTIAL APPENDIX 2. 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, (paragraph 3) information relating to the financial or business affairs of any particular person (including the authority holding that information.**

8. REASONS FOR RECOMMENDATIONS

- 8.1 The sale terms are considered to represent best value in the current market.
- 8.2 The property has been vacant for some years and neither Council departments, nor outside bodies, to whom it has been offered prior to marketing have considered it suitable for their purposes.
- 8.3 Further retention of the property will incur further holding costs.

9. BACKGROUND PAPERS

- 9.1 None.

10. CONTACT OFFICERS

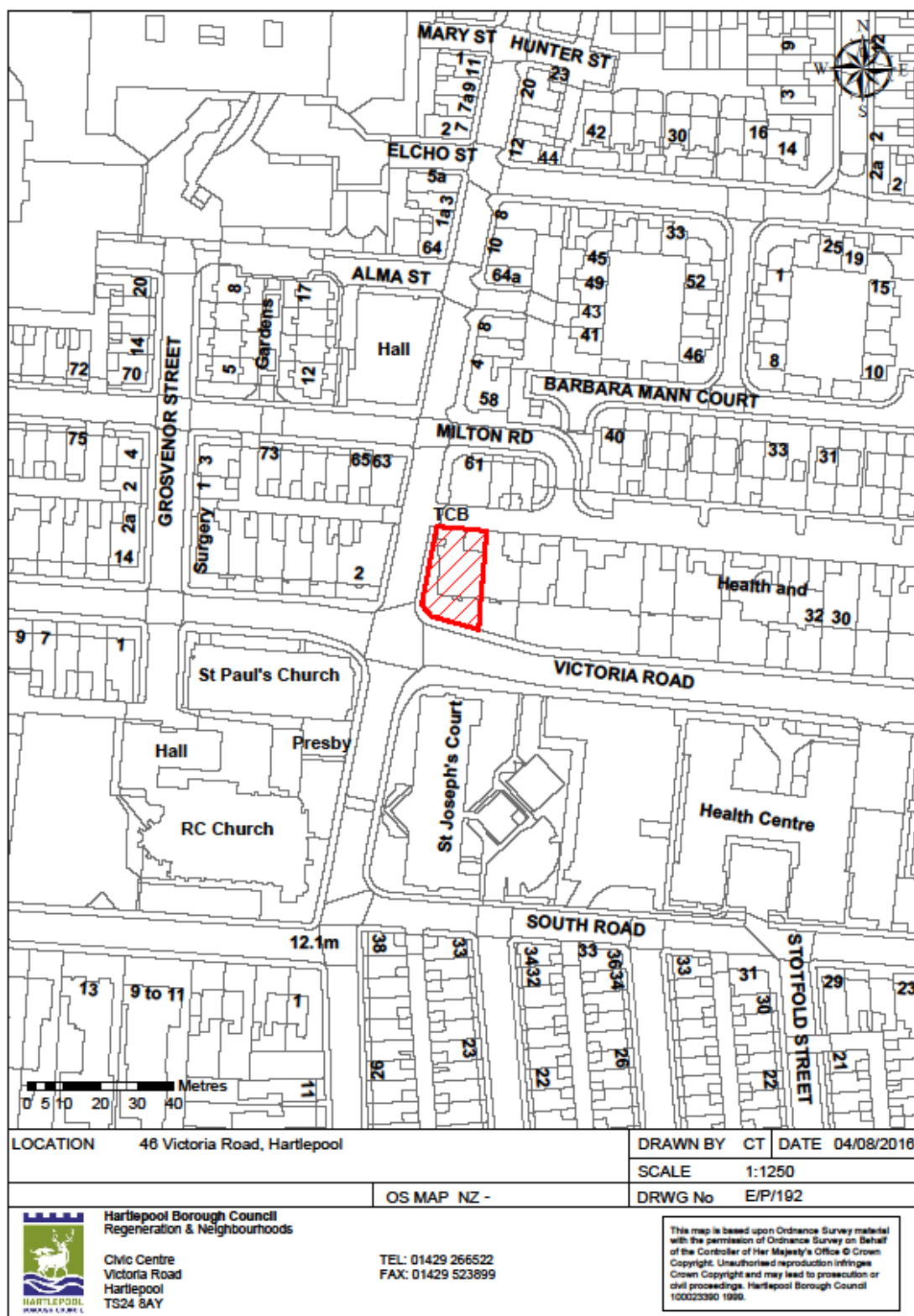
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Sign Off:-

Managing Director	Date: 07/09/2023
Director of Finance, IT and Digital	Date: 04/09/2023
Director of Legal, Governance and HR	Date: 05/09/2023

APPENDIX 1

LOCATION PLAN



FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: AUDIT AND GOVERNANCE COMMITTEE
INVESTIGATION - ACCESSIBILITY OF COUNCIL
SERVICES IN HARTLEPOOL FOR THOSE WITH
DISABILITIES AND LONG TERM CONDITIONS –
RESULTS OF ADDITIONAL CONSULTATION

Report of: Chair of the Audit and Governance Committee

Decision Type: Non Key

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

2.1 To present:-

- i) The results of the additional consultation, undertaken at the request of the Finance and Policy Committee on the 3rd July 2023; and
- ii) The Action Plan produced to inform consideration of the investigation's recommendations (**Appendix C**).

2.2 To seek consideration of the re-submitted recommendations of the Audit and Governance Committee's investigation, with due regard to the content of the Action Plan.

3. BACKGROUND

- 3.1 In June 2022, the Council's Audit and Governance Committee launched an investigation to find out how accessible council services are to people with disabilities, long term conditions and their carers. The Committee's investigation resulted in the formulation of a report containing nine recommendations which was presented to the Finance and Policy Committee on the 3rd July 2023.
- 3.2 During consideration of the Committee's findings, a number of comments were made by members of the Finance and Policy Committee in relation to the process for, and outcomes of, the consultation and engagement process. These included:-
- i) A request for clarity in relation to potential contradictions between public responses through the quick poll and full survey in terms of service satisfaction. It was noted that 78% of people who responded to the quick poll felt that the Council does not do enough to make its services accessible, whilst 55% of those who responded to the full survey had a positive experience in accessing services.
 - ii) Concern about the statistical relevance of the survey results as a basis for the formulation of the Committee's recommendations, given the low level of public response, and absence of organisational responses outside of those submitted by the blind or visually impaired community.
- 3.3 With due regard to point (ii), the Finance and Policy Committee agreed that a decision in relation to the recommendations of the Audit and Governance Committee would be deferred to allow further public engagement to be undertaken.
- 3.4 In accordance with the wishes of the Finance and Policy Committee an additional survey was undertaken between the 29th June 2023 and the 8th August 2023.

4. CONSULTATION DETAILS

- 4.1 The additional survey was undertaken via Hartlepool Borough Council's engagement platform 'Your Say' with alternative formats provided for the submission of views. These included paper and easy read versions of the survey, the ability to provide telephone feedback and in person meetings with individual groups and organisations.
- 4.2 Involvement in the survey was again heavily promoted via press release, social media, direct emails and telephone calls to as many of the organisations as possible. Across these various mechanisms, invitations to promote and / or participate in the survey, and offers of attendance at meetings of groups and organisations, were extended to:
- All Councillors (members were asked to identify any specific groups / bodies / individuals they would like to be engaged);

- All VCS groups across Hartlepool;
- Hartlepower (including its Sector Connector Group);
- Healthwatch (including 50+ Forum and Mental Health Forum);
- SENDIASS Hartlepool;
- Pathways to Independence;
- Hartlepool Deaf Centre;
- Hartlepool Vision Support;
- Hartlepool Carers;
- Hartlepool Special Needs Support Group;
- Armed Forces Liaison Group;
- The Bridge - Dementia advice and support; and
- CLIP.

4.3 With the approval of the Chair of the Finance, and Policy Committee and the Chair of the Audit and Governance Committee, the additional consultation focused on four questions:

Q1 - What do you think about the recommendations of the Audit and Governance Committee?

Q2 - Of the 9 recommendations which do you think we should prioritise to tackle first?

Q3 - Why did you choose that answer?

Q4 - Did you take part in the first consultation held last year?

5. CONSULTATION RESULTS

5.1 The additional consultation closed on the 27th August 2023 with a total of 46 18 responses received. An evaluation of the responses to each of the questions indicates that:

Question 1 - What do you think about the Audit and Governance Committee's recommendations?

- i) Views were largely positive with those who responded of the view that the **recommendations are 'valuable', 'laudable' and 'suitable'**. However, the 'real test' would be their effectiveness / implementation and how the changes are communicated and reviewed.
- ii) There were some concerns that the recommendations did not reach far enough and that the use of technology to support service users would not be helpful to those who did not have a smart phone or access to the internet. One suggestion being that case files should be tagged with relevant information regarding disabilities and access requirements.
- iii) The need for clear communication of accessibility information for buildings and events on the HBC website was highlighted. Some participants stated that staff should be aware of those with various disabilities and be able to sign post appropriately.

Question 2 – Of the 9 recommendations which do you think we should tackle first?

- i) Responses ranked the importance of implementation of the recommendations as:-

Priority 1 (Recommendation 1): Raise awareness of the facilities available for disabled customers and improve information (33.3% of responders – 6).

Priority 2 (Recommendation 4): Improve staff training on disability and accessibility issues (27.8% of responders – 5) and

Priority 3 (Recommendation 8): Carry out a consultation to find out if the creation of a passport / card / lanyard system could be useful for customers to show to staff so that their needs can be quickly recognised and responded to (22.2% of responders – 4).

Priority 4 (Recommendation 2): Reintroduce the text relay service and improve access for customers who are Deaf, have hearing loss or other communication / speech difficulties (5.6% of responders – 1), **(Recommendation 5)**: Use the Equality, Diversity and Inclusion Officer Group to identify improvements to services (5.6% of responders – 1) and **(Recommendation 6)**: Improve the Hartlepool.gov.uk website to make it more accessible and easier to use (5.6% of responders – 1).

- ii) Whilst not identified as the highest priority for immediate implementation via the survey, the remaining recommendations were recognised as being 'valuable', 'laudable' and 'suitable'.

Question 3 - Why did you chose your priority recommendation?

- i) Responses reinforces the findings of the original consultation (as detailed in the Audit and Governance Committee's Final Report) in that:
- It is not clear what services or facilities are available to people and it is important to communicate where people can get the help and support they need.
 - Staff training on disability and accessibility issues is key, and it is vital that within HBC staff have an awareness, understanding and appreciation of disabilities' and how this can impact on the experience of disabled people. In addition to this improved staff training will give the council a more effective pool of talent and resources to cope in any situation.
 - The use of an Equality, Diversity and Inclusion group to identify improvements to council services made sense as the group was already established.

Question 4 - Did you take part in the first consultation held last year?

Of the 18 responses received to the additional consultation, 8 (44.4%) had taken part in the original consultation. Despite extensive promotion only 10 new participants had been attracted to the additional consultation and overall response rate had again been low. On this basis, a total of 66 individuals had responded across both surveys and with this in mind the statistical relevance of the consultation results again needed to be recognised.

- 5.2 The anonymous nature of the survey means that it was not possible to show which groups had provided, or actively promoted, responses. In addition to this, the offer of in person engagement had only been taken up by one group, that being the Deaf Centre. The views expressed by the Deaf Centre mirrored those gathered via the survey and are detailed in **Appendix A**.
- 5.3 In summary, it should be noted that the results of the additional consultation supported the recommendations of the Audit and Governance Committee and. On this basis, the Committee is asked to reconsider the Audit and Governance Committee's final report (**Appendix C**) and approve its recommendations.
- 5.4 An Action Plan (**Appendix B**) has been produced to inform Members in consideration of the investigations recommendations.

6. PROPOSALS

- 6.1 No proposals are made in addition to the recommendations outlined in Section 8.

7. OTHER CONSIDERATIONS / IMPLICATIONS / ELT FEEDBACK

- 7.1 The Executive Leadership Team has considered the recommendations and proposed action plan and has expressed concerns about the resource implications associated with implementation, both from a staffing and financial perspective. In light of the very low rate of responses despite a second attempt at engagement, and the existing work that is underway through the Joint Sensory Support Plan and Joint Sensory Support Group, it is recommended that a proportionate approach is adopted, taking into account affordability.

RISK IMPLICATIONS	Failure to meet in full the requirements of the requirements within the Equality Act 2010 and the Public Sector Equality Duty.
FINANCIAL CONSIDERATIONS	Outlined in the Action Plan produced in response to the recommendations of the investigation (Appendix C).
LEGAL CONSIDERATIONS	None.
CHILD AND FAMILY POVERTY	None.

EQUALITY AND DIVERSITY CONSIDERATIONS	Since the first equality objectives were published in April 2012 the Council has continued to demonstrate that equality and diversity is a core part of what we do as an organisation. The recommendations of the investigation further demonstrate the Councils' commitment to this.
STAFF CONSIDERATIONS	No implications.
ASSET MANAGEMENT CONSIDERATIONS	No implications.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No implications.
CONSULTATION	The Committee undertook an extensive extended consultation and engagement exercise to seek residents' views and priorities in terms of the recommendations of the Audit and Governance Committee's investigation.

8. RECOMMENDATIONS

8.1 The Finance and Policy Committee is requested to:-

- i) Note the outcome of the extended consultation process and Action Plan produced; and
- ii) With due regard to the content of the Action Plan, consider the recommendations of the Audit and Governance Committee, following their investigation into the accessibility of council services in Hartlepool for those with disabilities and Long Term conditions, as detailed below:-
 - 1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-
 - i) Develop a communications campaign to:
 - Highlight the various support schemes and reasonable adjustments that are already have in place;
 - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance with everything in one place. Making those who find accessing the Civic Centre aware that the same service can be accessed elsewhere; and

- Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer.
 - ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.
 - iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.
 - iv) Create an “accessibility” tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.
- 2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-
- i) A Text Relay Service should be introduced;
 - ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;
 - iii) The creation of a network of British Sign Language (BSL) trained staff, to act as first point of contact for volunteers, be explored;
 - iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and
 - v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.
- 3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).
- 4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-
- i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and

- ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.
- 5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.
- 6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-
 - i) Read options for documents, to allow access by blind or visually impaired residents;
 - ii) Captions / signing on social media posts / videos; and
 - iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded.
- 7) Council reports, documents and forms must be accessible (easy read / screen reader friendly) and going forward clear content guidance should to be provided, and its use promoted, including:-
 - i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and
 - ii) Promotion of use of a document accessibility checker.
- 8) A consultation to be undertaken with partners on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly recognise and respond to any additional support needs.
- 9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.

9. REASONS FOR RECOMMENDATIONS

- 9.1 To identify opportunities to improve the accessibility of Council services for those with Disabilities and Long Term Conditions.

10. BACKGROUND PAPERS

- 10.1 The following background paper(s) were used in the preparation of this report:
- a) Hartlepool Joint Strategic Needs Assessment
 - b) Long Term Conditions – Working Well – Health – Hartlepool Borough

- Council
- c) Care Act 2014
 - d) [EQUALITY ACT 2010 PUBLIC SECTOR DUTY.pdf](#)
 - e) Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018
 - f) https://www.accessable.co.uk/organisations/hartlepool-borough-council/access_guides?vtag=false
 - g) <https://www.gov.uk/government/publications/public-sector-equality-duty>
 - h) <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>
 - i) Audit and Governance Committee – Reports and minutes
 - j) Accessibility of Council Services for those with Disabilities and long term Conditions in Hartlepool – Final report May 2023
 - k) Minutes of the Finance and Policy Committee – 3rd July 2023

11. CONTACT OFFICERS

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Sign Off:-

Managing Director	Date: 29 th August 2023
Director of Finance, IT and Digital	Date: 29 th August 2023
Director of Legal, Governance and HR	Date: 6 th September 2023

Deaf Centre Contribution to Additional Consultation

Recommendation 1: Raise awareness of the facilities available for disabled customers and improve information.

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *Promotion should include Hartbeat and be provided in person to groups / bodies (e.g. the Deaf Centre), posters and leaflets.*

Recommendation 2: Reintroduce the text relay service and improve access for customers who are Deaf, have hearing loss or other communication / speech difficulties.

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *It was noted that most deaf people use standard text services on their mobile phones and whilst the reintroduction of this service was a very positive move, written English was not the first language of many. As such, this service needed to be provided in conjunction with the availability of face to face support.*

Recommendation 3: Provide access to a video / telephone translation service (for BSL and other languages).

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *Promotion and training will be essential.*

Recommendation 4: Improve staff training on disability and accessibility issues.

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *Training needs to be refreshed annually and should include carers as well.*

Recommendation 5: Use the Equality, Diversity and Inclusion Officer Group to identify improvements to services.

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *Good idea and the continued development of the services to support people is essential.*

Recommendation 6: Improve the Hartlepool.gov.uk website to make it more accessible and easier to use.

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *Reference was made to the Web Content Accessibility Guidelines (WCAG) (<https://accessibility-manual.dwp.gov.uk/accessibility-law/web-content-accessibility-guidelines#:~:text=WCAG%202.1%20is%20a%20list%20of%20criteria.%20Each,make%20up%203%20levels.%20A%2C%20AA%20and%20AAA.>) and the importance of the Council's website achieving a AAA rating, the provision of captions and sub titles was emphasised.*

Recommendation 7: Ensure that Council reports, documents and forms are accessible and easy to read / use

Support for Recommendation / Priority – Yes (*High Priority*)

Other comments – *Comments as per those for recommendation 6.*

Recommendation 8: Carry out a consultation to find out if the creation of a passport / card / lanyard system could be useful for customers to show to staff so that their needs can be quickly recognised and responded to.

Support for Recommendation / Priority – Yes (*Medium Priority*)

Other comments – *It was felt that this would be a good idea, however, it needed to be provided with appropriate training. In addition to this, it was suggested that details of individual support needs could be recorded on council records, in a similar way to that done by hospitals.*

Recommendation 9: Share the lessons learned from the development of the Highlight Leisure centre across all services.

Support for Recommendation / Priority – Yes (*Medium Priority*)

Other comments – *Nothing added.*

AUDIT AND GOVERNANCE SCRUTINY ENQUIRY ACTION PLAN**NAME OF COMMITTEE:** Audit and Governance Committee**NAME OF SCRUTINY ENQUIRY:** Accessibility of Council Services in Hartlepool for Those with Disabilities and Long Term Conditions

+ please detail any risk implications, financial / legal / equality & diversity / staff / asset management considerations

* please note that for monitoring purposes a date is required rather than using phrases such as 'on-going'

RECOMMENDATION	RESPONSE / PROPOSED ACTION	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
<p><u>Identified as the highest priority for implementation.</u></p> <p>1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-</p> <p>i) Develop a communications campaign to:</p> <ul style="list-style-type: none"> - Highlight the various support schemes and reasonable adjustments that are already have in place; - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance with everything in one place. Making those who find accessing the Civic Centre aware that the 	<p>i) Communications Plan to be developed with campaign work to begin from August 2023</p>		<p>i) To iv) Connor Kerr / Bev Bearne</p>	<p>March 2024</p>

<p>same service can be accessed elsewhere; and</p> <ul style="list-style-type: none"> - Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer. <p>ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.</p> <p>iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.</p> <p>iv) Create an “accessibility” tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.</p> <p>v)</p>	<p>ii) Communications Team to facilitate the distribution of posters and leaflets to community buildings</p> <p>iii) Guides to creating accessible content and booking interpreters are already available on the Equality and Diversity tile on the intranet for staff</p> <p>iv) An Equality Diversity tile is in place on the intranet homepage and links to a range of information including the above</p>			<p>March 2024</p> <p>Complete</p> <p>Complete</p>
<p><u>Identified as the joint fourth priority for implementation.</u></p> <p>2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-</p>				

Appendix B

<p>i) A Text Relay Service should be introduced;</p> <p>ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;</p> <p>iii) The creation of a network of BSL trained staff, to act as first point of contact for volunteers, be explored;</p>	<p>i) The Text Relay service is now in use via customer services for all Adult Social Care Team including Adult Safeguarding / ISPA with access to the Relay UK app.</p> <p>The Text Relay system will be introduced in the support hub as soon as a mobile phone is available that has the capacity to run it – a phone is on order.</p> <p>ii) There would be a cost implication to this.</p> <p>Civic Centre - Meeting rooms within the Civic Centre reception area can be utilised as pod facilities – wider issue is access to translation services at point of contact but this is addressed further in the plan.</p> <p>Community Hubs - There is a pod that that could be used in the community hubs for 1:1 and a laptop or tablet could be provided to support video interpretation. This would, however, need to be booked and a pilot of block booking a few hours a week can be trialled.</p> <p>iii) Staff volunteers would be a first point of contact with any complex communication via qualified translators. There would be a</p>	<p>Financial implication to be considered by ELT</p> <p>Financial implication to be considered by ELT</p>	<p>Laura Griffiths / Julie Howard / Leigh K</p> <p>Laura Griffiths / Julie Howard</p> <p>Gemma Ptak / Leigh Keeble</p> <p>Laura Griffiths / Julie Howard</p>	<p>Complete</p> <p>Complete</p> <p>31 December 2023 (tbc subject to finances)</p>
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<p>iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and</p> <p>v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.</p>	<p>resource implication in setting this up.</p> <p>Currently exploring training provision with the Council's Organisational Development team who are in contact with RNIB and RNID – it is recommended that this be mandatory training for all frontline staff.</p> <p>There is also the potential opportunity to offer BSL training to employees through the Workforce Development Programme and is currently being reviewed.</p> <p>In terms of the Community Hubs staff some level of training would be useful but this would need to be used regularly to be effective.</p> <p>iv) Easy to do with no additional resources (other than loading information.</p> <p>A sign language video could be produced that could be accessible via a range of mediums including web-site and Hartlepool Now.</p> <p>v) Indications as part of the investigation were that new hearing aids aren't compatible with the existing system. This</p>	<p>Financial implications would need to be considered by ELT</p>	<p>Laura Griffiths / Julie Howard</p> <p>Laura Griffiths / Julie Howard</p>	<p>31 December 2023(subject to finances)</p>
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	action has be allocated to the Building Maintenance team for review.			
<p><u>Identified as the joint fourth priority for implementation.</u></p> <p>3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).</p>	<p>- This was specifically requested by the BSL community so I think that this should be referenced and linked to a facility to request a BSL interpreter at the same time – the private room is no use without the translation service.</p> <p>- The provision of a room in the Civic is possible and a standard laptop could be used to provide a video translation service (no other equipment needed and ‘Big Word’ system is already used for translations). This could also be provided in the central hub.</p> <p>Rooms are in fact already available on request for all residents but this was something that Deaf users really wanted. The question being – why are deaf residents not aware of this – do we publicise it and are staff encouraged to use it) The introduction of a process to ensure that they are taken to a separate room for private signed / translated discussions would be achievable with a refresh of accessibility awareness training.</p>	<p>Financial implications would need to be considered by ELT</p>	<p>Laura Griffiths / Julie Howard</p>	<p>31 December 2023 (subject to finances)</p>

	<p>- Request for translation services and use of the text service is low (historic use of the video translation service had also been low) but it is unclear if this is because of a failure to engage or that individuals felt that their views aren't heard.</p> <p>- We do not have a person qualified to provide translation services. Having trained staff to be a first point of contact (basic translation / signposting services) would be useful but would have cost implications and demand is unclear. A suggested option, albeit with a financial implication being:</p> <ul style="list-style-type: none"> • A refresh of awareness training • Staff with basic translation services and knowledge of how to access other systems • A pilot scheme for the provision of a trained individual to be located in the Central Hub and / or Civic (drop in sessions half a day a week), demand and success of which could be monitored. This to be publicised as an option to access translators and other options provided (such as text service or video translation, etc.) • Introduction of sign video service to be scoped / considered although usage of previous solutions has been historically moderate. 			
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<p><u>Identified as the second priority for implementation.</u></p> <p>4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-</p> <p>i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and</p> <p>ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.</p>	<p>There may be some courses on Skillsgate that staff can access however we don't have enough licences for all staff so there would need to be a managed process to this.</p>	<p>Financial implications would need to be considered by ELT</p>	<p>Hayley Martin / Gillian Laight</p>	<p>TBC</p>
<p><u>Identified as the joint fourth priority for implementation.</u></p> <p>5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.</p>	<p>A new Equality, Diversity and Inclusion Officer Group was established at the beginning of the year and this falls under their remit.</p>		<p>Catherine Grimwood / Bev Bearne</p>	<p>Complete</p>
<p><u>Identified as the joint fourth priority for implementation.</u></p> <p>6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-</p>				

<ul style="list-style-type: none"> i) Read options for documents, to allow access by blind or visually impaired residents; ii) Captions / signing on social media posts / videos; and iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded. 	<ul style="list-style-type: none"> i) Current website to be replaced and this recommendations will be covered in the specification for the new site ii) and iii) will be completed as recommended 		<p>Connor Kerr / Bev Bearne</p>	<p>March 2024</p> <p>December 2023</p>
<p>7) Council reports, documents and forms must be accessible (easy read / screen reader friendly) and going forward clear content guidance should to be provided, and its use promoted, including:-</p> <ul style="list-style-type: none"> i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and ii) Promotion of use of a document accessibility checker. 	<ul style="list-style-type: none"> i) The brand guidelines refresh will include reference to accessible content. ii) MS Word has an in-built document accessibility checker. Instructions on how to use it are on the intranet on the Equality and Diversity tile. 		<p>Connor Kerr / Bev Bearne</p>	<p>March 2024</p>
<p><u>Identified as the third priority for implementation.</u></p> <p>8) A consultation to be undertaken with partners (attendees to be confirmed) on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly</p>	<p>A number of National Card schemes exists but is not free to access https://www.did-card.co.uk/</p> <p>It would not be possible to respond to a person's unique presentation just by way of showing a card. There</p>	<p>Financial implications would need to be considered by ELT</p>	<p>Neil Harrison /John Lovatt</p>	<p>TBC</p>

recognise and respond to any additional support needs.	are a number of existing schemes that can support identification of a certain condition however people should be considered as individuals in their own right.			
9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.	<p>It needs to be recognised that while this approach has been well received, HBC does not have the staff or funding to take such an in depth approach to every strategy and development moving forward.</p> <p>On this basis:</p> <ul style="list-style-type: none"> - Implementation of the approach will be scheme specific; - Whilst Highlight can set the benchmark to aspire to, the interventions will be scalable to the size of the project; and - Identification of lead officers for the implementation of the approach will be down to individual project managers, with recommendations coming forward via ELT for consideration by the Capital Programme Board depending on the nature of the scheme. - 	Financial implications would need to be considered by ELT	Kieran Bostock	Complete



AUDIT AND GOVERNANCE COMMITTEE FINAL REPORT

ACCESSIBILITY OF COUNCIL SERVICES IN HARTLEPOOL FOR THOSE WITH DISABILITIES AND LONG TERM CONDITIONS

MAY 2023

EXECUTIVE SUMMARY

Introduction

Over many years Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions, including investment in state-of-the-art facilities such as the Centre for Independent Living (CIL) and partnership working with the health and community / voluntary sector. More was, however, needed if Hartlepool was to become a truly accessible town for all residents and visitors, ensuring that the voices of residents living with disabilities and long term conditions are:

- Sought;
- Heard; and
- Incorporated into future Council initiatives which may impact on the physical, economic and social environment of the town.

A Council Motion drew attention to the effect of the COVID-19 pandemic, highlighting the extent of pre-existing health inequalities in many towns and cities, in particularly those in the North of England. With particular reference to high numbers of Hartlepool residents with disabilities and long term conditions, attention was drawn to the impact on their ability to access services, facilities and many aspects of day-to-day life which many take for granted. Further impacting on their physical and mental wellbeing and leading to isolation, loneliness and exclusion.

In response to this Motion, Full Council agreed that the Audit and Governance Committee would undertake a review of Council regeneration & development activity and accessibility to services for those with disabilities and long term conditions. This was to ensure that any barriers, physical, procedural or otherwise, which may inhibit access to services and day to day living are identified, so that reasonable adjustments can be made.

Conclusions

- 1) Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has invested in state-of-the-art facilities such as the Centre for Independent Living (CIL). There is, however, always more that can be done to ensure that the voices of residents are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.
- 2) Hartlepool staff are to be commended on their activities to support and signpost residents with disabilities and long term conditions. Experience being that where services are easy to access for those with disabilities or long term conditions, they are easier for all to access!
- 3) Accessibility is so much more than just physical access and must be given high priority in the development and provision of services. As such:
 - It is essential to have a clear understanding of Hartlepool's disabled community, its needs and challenges if the right services are to be provided in the right way. Only with this will the true level of need be identified to support the requirement for service change and adjustments.

- Departments need to be supported within the available resources to make any necessary improvements and provided with specialist advice and support where required.
 - The needs of people with disabilities and long term conditions need to be represented in the development and delivery of services. A good example, as identified by the disabled community, is the involvement of CLIP in the development of the Highlight building. This being identified as good practice by the disabled community.
 - Where residents with a disability or long term condition are involved in consultation / engagement as part of the development of services, there is a need to ensure that they are updated on the outcome of consultations and decisions as a matter of course. This should be done at an early stage in the process with participants involved in ongoing conversations throughout the development, deliver and review of services. Not as a one off event.
 - Workforce development is essential in terms of training to increase disability awareness and an understanding of what reasonable adjustments can be made.
- 4) Hartlepool Borough Council should at every opportunity champion the provision of accessible services with its partners, local business' and other organisations across the town.
 - 5) Emphasis needs to be placed on the promotion of the social model of disability, changing attitudes towards disabled people and improving disability awareness.
 - 6) There needs to be a consistent approach to asking people about additional needs at the first point of contact. Services that are accessed regularly by disabled people and those with long term conditions should share best practice.
 - 7) The completion of Impact Assessments to inform the decision making process is an essential part of the service development process. These assessments need to be undertaken as early as possible in the development of services and in order to simplify the process, it has been agreed that the Child and Family Poverty Impact Assessment and Equality and Diversity Impact Assessment will be amalgamated.
 - 8) Many adjustments do not require significant investment in terms of time or resources. A great deal can be achieved by taking a flexible approach to service delivery and making small changes to the way in which things are done. This is where involving disabled people in conversations around service delivery could be particularly beneficial.
 - 9) Subject to compliance with the requirements of the Equality Act, any proposals for the provision of additional activities, or service changes, must be considered alongside the financial challenges facing the local authority and be within available resources.
 - 10) Making every contact count (MECC) needs to be a priority with improved communication between departments to remove the need for residents to repeat their issues.
 - 11) Following calls for involvement in the investigation from groups and individuals across the town, the most significant level of input was received from Hartlepool's Deaf community. The investigation findings have subsequently been heavily influenced by their response and it is recognised that it may be beneficial to undertake further consultation as part of the process for the implementation of the Committee's recommendations.

- 12) The mystery shopper process was a beneficial element of the consultation process undertaken as part of the investigation and should be used more frequently as a means of assessing lived experiences

Recommendations

- 1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-
 - i) Develop a communications campaign to:
 - Highlight the various support schemes and reasonable adjustments that are already have in place;
 - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance with everything in one place. Making those who find accessing the Civic Centre aware that the same service can be accessed elsewhere; and
 - Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer.
 - ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.
 - iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.
 - iv) Create an "accessibility" tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.
- 2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-
 - i) A Text Relay Service should be introduced;
 - ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;
 - iii) The creation of a network of BSL trained staff, to act as first point of contact for volunteers, be explored;
 - iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and
 - v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.

- 3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).
- 4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-
 - i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and
 - ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.
- 5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.
- 6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-
 - i) Read options for documents, to allow access by blind or visually impaired residents;
 - ii) Captions / signing on social media posts / videos; and
 - iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded.
- 7) Council reports, documents and forms must be accessible (easy read / screen reader friendly) and going forward clear content guidance should to be provided, and its use promoted, including:-
 - i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and
 - ii) Promotion of use of a document accessibility checker.
- 8) A consultation to be undertaken with partners on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly recognise and respond to any additional support needs.
- 9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.

1. PURPOSE OF REPORT

- 1.1 To present the findings of the Audit and Governance Committee's investigation into the 'Accessibility of Council Services for those with Disabilities and long term Conditions in Hartlepool'.

2. SETTING THE SCENE

- 2.1 On the 25th February 2021 Full Council approved the below motion and referred the review to the Audit and Governance for consideration.

"The COVID-19 pandemic has highlighted and emphasised the extent of pre-existing health inequalities in many towns and cities and particularly those in the North of England. Hartlepool has high numbers of residents with disabilities and long term conditions which often impact massively on their ability to access services, facilities and many aspects of day-to-day life which many of us take for granted. This can impact on physical and mental wellbeing and subsequently lead to isolation, loneliness and exclusion".

- 2.2 Over many years Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has invested in state-of-the-art facilities such as the Centre for Independent Living (CIL) and worked closely with health and community and voluntary sector partners.
- 2.3 However, it is recognised that more can be done to make Hartlepool a truly accessible town for all of our residents and visitors to ensure that the voices of residents living with disabilities and long term conditions are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.
- 2.4 To this end, the Labour Group called upon the Council to agree that the Audit and Governance Committee examine the contents of the Motion in the next municipal year:

"A review of Council regeneration & development activity and accessibility to services for those with disabilities and long term conditions to ensure that any barriers, physical, procedural or otherwise, which may inhibit access to services and day to day living are identified, so that reasonable adjustments can be made"

- 2.5 In accordance with the process for consideration of mandatory referrals from Full Council, a meeting of the Audit and Governance Committee was convened to receive the referral and 'scope' the process for its consideration (including detailed written evidence and extensive public engagement). Further meetings of the Scrutiny Co-ordinating Committee were subsequently held on the 13 January 2022 and the 28 February 2022 at which the Committee received evidence and information to assist in the formulation of its views, conclusions and recommendations.

3. AIM AND TERMS OF REFERENCE FOR THE INVESTIGATION

- 3.1 The Audit and Governance Committee met to receive the referral and agreed that the aim of its investigation would be to *‘Review the accessibility of Council services for those with disabilities and long term conditions to ensure that any barriers, physical, procedural or otherwise, which may inhibit access to services and day to day living are identified, so that reasonable adjustments can be made in Hartlepool’.*
- 3.2 The Committee also agreed the ‘scope’ of the investigation, including detailed sources of evidence and mechanisms for extensive public engagement which were to be used to inform the formulation of conclusions and recommendations (as set out in Sections 12 and 13 of this report). A detailed record of the issues raised during these meetings is available from the Council’s Democratic Services and a summary of the terms of reference for the investigation are outlined in **Appendix 1.**

4. MEMBERSHIP OF THE AUDIT AND GOVERNANCE COMMITTEE

- 4.1 The membership of the Audit and Governance Committee was Councillors Councillors Allen*, Boddy, Cook, Cowie, Creevy*, Falconer*, Feeney, Hall, Loynes, D Nicholson*, Picton, Richardson, Riddle and Smith.

* Added to the membership during the course of the investigation.

5. DEFINITIONS OF ACCESSABILITY, DISABILITY, LIFE-LONG CONDITIONS AND DISCRIMINATION

- 5.1 As a starting point the Committee gained an understanding of what is meant by ‘accessibility’, ‘disability’, ‘life-long conditions’ and ‘discrimination’ for use as a baseline for the investigation.
- 5.2 Members appreciated that as part of discussions a clear differentiation needed to be made between ‘accessibility’ with ‘usability’:
- Usability being the extent to which a product (such as a device, service, or environment) can be used by specified users to achieve specified goals.
 - Whilst accessibility is:-
 - The concept of whether a product or service can be used by everyone and refers to the design of products, devices, services, or environments to be usable by people with disabilities. Ensuring both "direct access" (i.e. unassisted) and "indirect access" (compatible with a person's assistive technology).
 - More than just physical access, it is also relates to accessibility of lifetime opportunities (e.g. financial inclusion, routes to employment and transport, etc.).

5.3 It was agreed by Members that consideration of both “direct” and “indirect” access needed to form part of the investigation, however, only one of the protected characteristics laid down within the Equality Act was to be focused on. That being ‘disability’.

5.4 It was agreed that the definition of ‘disability’¹ to be applied for the purpose of the investigation would be ‘a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities’.

5.5 Other definitions were:

- Substantial is more than minor or trivial, e.g. it takes much longer than it usually would to complete a daily task like getting dressed’; and
- Long term conditions². The effect of an impairment is long-term if:
 - (a) It has lasted for at least 12 months,
 - (b) It is likely to last for at least 12 months, or
 - (c) It is likely to last for the rest of the life of the person affected.



6. NATIONAL EQUALITY LEGISLATION AND HOW IT APPLIES TO LOCAL AUTHORITIES

6.1 The Committee explored the legal requirements within the Equality Act 2010 and the Public Sector Equality Duty, as detailed below.

The Equality Act 2010. Protection of people from discrimination in the workplace and wider society; and

The Public Sector Equality Duty. Supporting local authorities in making good decisions, ensuring that they are aware of how different people are affected by their activities and are providing activities that are appropriate, accessible and meet different people’s needs.

6.2 Looking specifically at how the Public Sector Equality Duty applies to Hartlepool Borough Council services and activities, Members found that the Council is required to **‘ensure that the needs of all individuals are considered in their day to day work, in shaping policy, delivering services and in relation to their own employees.’** There is also a requirement to have due regard to the need to:-

- a) Eliminate unlawful discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act;
- b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it:

¹ Equality Act 2010

² kingsfund.org.uk

- Removing or minimising disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
- Taking steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it; and
- Encouraging persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it, with due regard to:

- Tackling prejudice; and
- Promoting understanding.

d) Publish equality objectives, at least every four years, and information to demonstrate their compliance with the public sector equality duty.

6.3 The Committee recognised that the Equality Framework³ for Local Government plays a key part in fulfilling these obligations and was interested to find out how Hartlepool Borough Council services perform against the framework. Members also acknowledged the importance of equality as part of the decision making process and the need to:-

i) Embed the below principles into the decision making processes and activities:-

Knowledge – those who exercise the public body’s functions need to be aware of the requirements of the Equality Duty. Compliance with the Equality Duty involving a conscious approach and state of mind.

Timeliness – the Equality Duty must be complied with before and at the time that a particular policy is under consideration or decision is taken – the Equality Duty cannot be satisfied by justifying a decision after it has been taken.

Real consideration – consideration of the three aims of the Equality Duty must form an integral part of the decision-making process and must be exercised in substance, with rigor and an open mind in such a way that it influences the final decision.

Sufficient information – the decision maker must consider what information they have and what further information is needed in order to give proper consideration to the Equality Duty.

No delegation – public bodies are responsible for ensuring that any third parties which exercise functions on their behalf are capable of complying with the Equality Duty, are required to comply with it and that they do so in practice and this duty cannot be delegated.

Review – public bodies must have regard to the Equality Duty not only when a policy is developed and decided up but also when it is implemented and reviewed as it is a continuing duty.

³ Equality Framework (<https://www.local.gov.uk/publications/equality-framework-local-government-eflg-2021>)

ii) Ensure that key people are aware of the requirements of the Equality Duty:

- Board / Committee members;
- Senior Managers;
- Equality and Diversity staff;
- Human Resources staff;
- Policy makers;
- Communication staff;
- Analysts;
- Front line staff; and
- Procurement and Commissioning staff.

6.4 The Committee gained an understanding of the mechanisms the local authority already has in place to ensure that the principles of the framework are embedded into the decision making processes and activities. Members were familiar with the requirement for completion of various needs assessments as part of decision making processes and it was suggested that it could be beneficial to consider merging the equality and poverty assessments going forward.

6.5 In addition to this, attention was drawn to the availability of awareness training in terms of the provision of services for people with disabilities and long term conditions. This was discussed in greater detail later in the report.

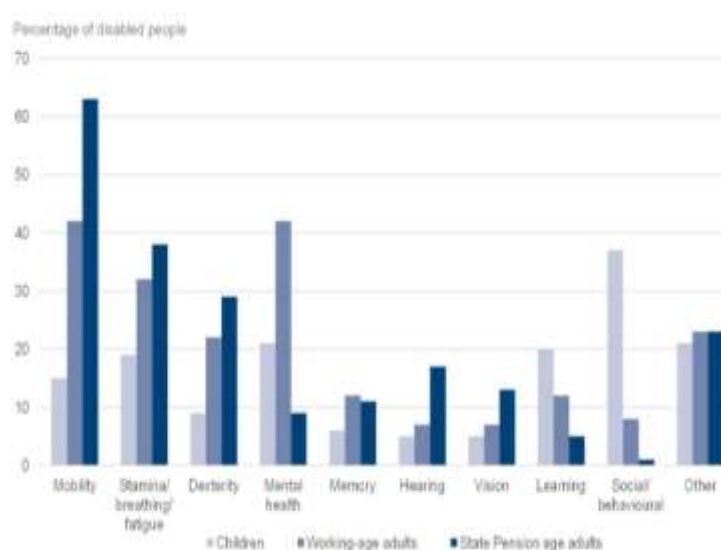
7. DISABILITY AND LONG TERM CONDITIONS - NATIONAL AND LOCAL DATA

7.1 Evidence provided allowed the Committee to compare and contrast data in relation to disabilities and long term conditions on a national and local basis.

National Levels of Disability

7.2 Members noted with interest that Census 2021 results for England showed that in England a smaller proportion, but larger number, of people reporting a disability (17.7%, 9.8 million), compared with 2011 (19.3%, 9.4 million)⁴. Further examination of the data also showed that:

- 18.7% of females report a disability, compared to 16.5% of males
- 59% of people aged 80 and over reported a disability
- 9% of children are disabled⁵
- 21% of working age adults are disabled⁶
- 42% of pension age adults are disabled⁶
- Disabilities cover a range of Conditions



⁴ Census 2021

⁵ UK disability statistics: Prevalence and life experiences – House of commons Research briefing July 2022

7.3 The impact of deprivation on the health and wellbeing of populations was recognised by the Committee, however, Members were concerned to find that whilst 21.6% of 40 to 44 year-olds were disabled in the most deprived areas only 8.1% were disabled in the least deprived areas. Concern was also expressed regarding the impact of the increasing costs of living for disabled residents, with:

- i) 53% of disabled people employed, compared to 82% of non-disabled people (disabled people being 3 times as likely to be economically inactive⁶).
- i) Life costs are £583 more on average a month if you're disabled and for almost a quarter (24%) of families with disabled children, extra costs amount to over £1,000 a month⁷.
- ii) After housing costs, the proportion of working age disabled people living in poverty is 27%. This is, however, higher than the proportion of working age non-disabled people at 19%⁸.

Regional and Hartlepool Levels of Disability

7.4 In setting the context for the investigation, the Committee was not surprised to find (as shown in Table 1) that the North East of England has the highest proportion of people reporting a disability in England (21.2%, 567,000), compared to the national rate of 17.7%⁹.

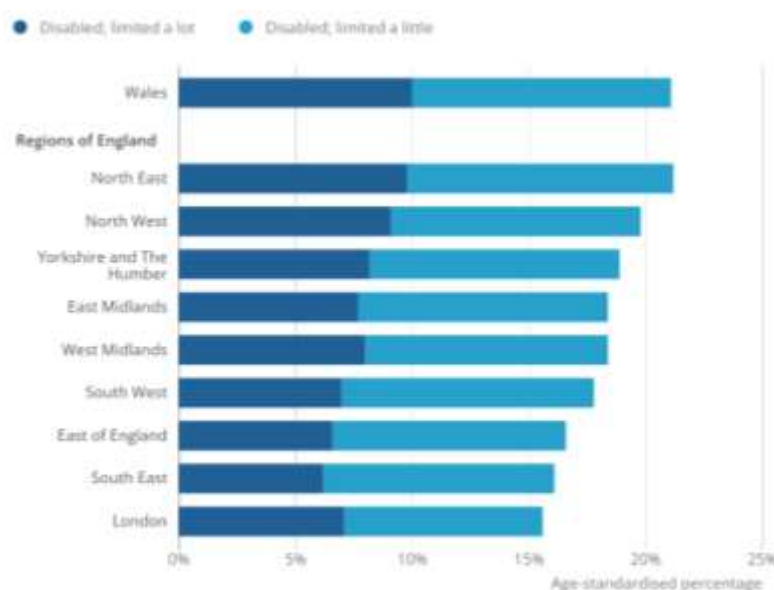


Table 1 - How disability (age-standardised) varies across local authorities in England and Wales, 2021

7.5 Breaking this down even further to focus specifically on the position in Hartlepool, Members discovered that:

- i) 21,150 people in Hartlepool have some form of disability (22.9% of the population compared to 17.7% in England)⁸;

⁶ Labour Market Survey

(<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/datasets/labourmarketstatusofdisabledpeoplea08>) quoted by Scope at <https://www.scope.org.uk/media/disability-facts-figures/>

⁷ Scope "The Disability Price Tag" report (2019) <https://www.scope.org.uk/campaigns/extra-costs/disability-price-tag/>

⁸ Scope's analysis of the Government's "Households Below Average Income" report (2019-20)

(<https://www.gov.uk/government/statistics/households-below-average-income-for-financial-years-ending-1995-to-2020/households-below-average-income-an-analysis-of-the-income-distribution-fye-1995-to-fye-2020>) quoted at

<https://www.scope.org.uk/media/disability-facts-figures/>

⁹ Census 2021

- ii) 11,645 females in Hartlepool have a disability (23.9% of the female population compared to 18.7% in England)⁸;
- iii) 9,490 males in Hartlepool have a disability (21.7% of the male population compared to 16.5% in England)¹⁰;
- iv) Rates of disability in Hartlepool are the highest in the Tees Valley (as shown in Table 2)⁹; and
- v) The percentage of homes in Hartlepool with 2 or more disabled residents is the highest in the Tees Valley, and is above the England and Wales figure (as shown in Table 4)⁹.
- vi) The prevalence of sever frailty in Hartlepool is higher than other Tees Valley authorities, were frailty is predominantly moderate (as shown in Table 3¹¹).

Area	Disabled under the Equality Act (%)
England	17.7%
Hartlepool	22.9
Middlesbrough	21.9
Redcar and Cleveland	21.4
Stockton-on-Tees	20.1
Darlington	19.4

Table 2 – Disability Rates across the Tees Valley (2021)⁹

Table 3 - How disability within households varied across local authorities in England and Wales, 2021⁹

Area	1 person disabled in household (%)	2 or more people disabled in household (%)
England and Wales	25.6	6.7
Hartlepool	30.9	8.7
Middlesbrough	29.4	7.8
Redcar and Cleveland	30.1	8.2
Stockton-on-Tees	27.4	7.7
Darlington	27.2	6.6

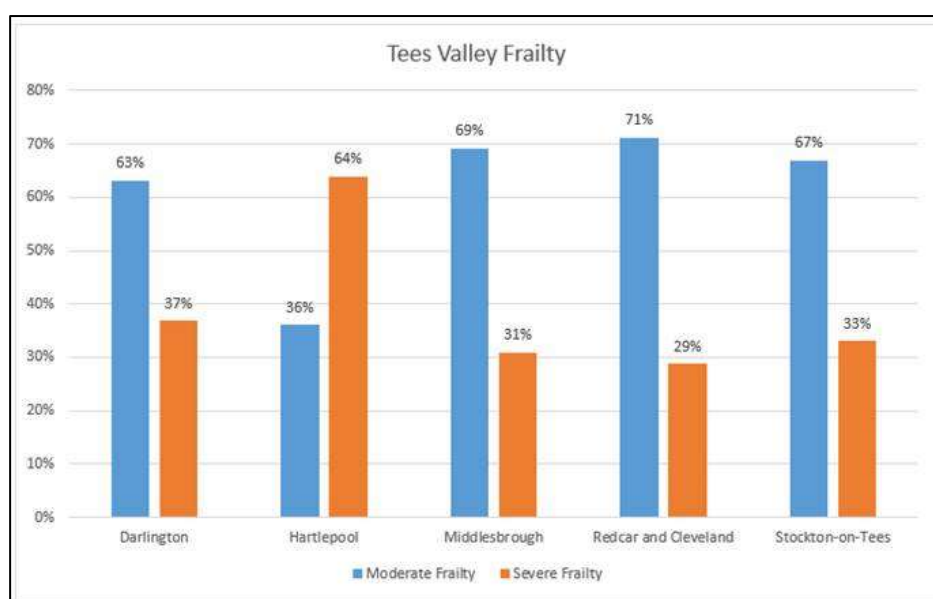


Table 4 – Frailty Levels¹⁰

¹⁰ Census 2021

¹¹ [\[MI\] GP Contract Services - England, 2021-22 - NHS Digital](#)

- 7.6 The Committee was concerned to find that across the Tees Valley, Hartlepool not only has the highest rate of disability, but also the highest percentage of households with two or more disabled residents and highest prevalence of severe frailty. The data provided reinforced to Members the importance of having in place truly accessible services.

8. PARTNER EVIDENCE

- 8.1 Evidence provided by the Community Led Inclusion Partnership (CLIP) brought to the attention of the Committee three models of disability (charity, medical and social) and provided a first-hand / lived experience perspective on each (detailed in Table 5).

Table 5 – Disability Models

Model	First-hand perspective
<i>The Charity Model</i>	Can depict disabled people as victims of circumstance, deserving of pity, unable to look after themselves or manage their own affairs and need charity in order to survive.
<i>The Medical Model</i>	Can assume that the first step solution is to find a cure or to use terminology to make disabled people more “normal”.
<i>The Social Model</i>	Depicts the loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical or social barriers. Barriers can be physical, like buildings not having accessible toilets. Or they can be caused by people's attitudes to difference, like assuming disabled people can't do certain things.

- 8.2 Member were interested to find that the charity and medical models of disability tend to be used by non-disabled people to define / explain disability and that the charity model in particular was not supported by the disabled community due to the exceptionally negative perception it creates. Members noted these concerns and supported the view that going forward emphasis needed to be placed on the promotion of the social model of disability, changing attitudes towards disabled people, improving disability awareness and learning from feedback obtained from the disabled community. Particular emphasis to be placed on the importance of feedback from, and involvement with, the disabled community to improve:

- i) Access to social activities, employment, transport, education, parking, healthcare (Inc. GP appointments), independent living, local places, drop curbs and events (some of which was within the remit of the investigation);
- ii) Understanding of the disabled community, its needs and challenges;
- iii) Co-production of services development and delivery in Hartlepool; and
- iv) Workforce and Councillor Disability awareness.

9. CONSULTATION AND ENGAGEMENT

- 9.1 The Committee undertook an extensive consultation and engagement exercise between the 9th May 2022 and the 23rd October 2022 to seek residents' opinions and lived experiences. The consultation was undertaken via a public survey, organisational / professional survey, quick poll, consultation workshops and mystery shopper exercise. Details of the consultation process are outlined over the page and an evaluation summary is provided in Section 11.

9.2 **Public Survey and Quick Poll** - An online public survey and quick poll was run on the public consultation project page via the Your Say consultation platform. The quick poll posing the question “On the whole, do you think the Council does enough to make its services accessible for people with disabilities and their carers?”

9.3 Extensive efforts were made to promote the consultation, and ensure that the survey itself was accessible to all. Details of how this was achieved are outlined in **Appendix 2**.

9.4 58 residents participated in the consultation, of which 14 participated in the quick poll and 49 in the survey¹² (5 completing both). Members were disappointed to find from the quick survey that 78% (11 people) had said they did not think the Council does enough to make its services accessible for people with disabilities and their carers. It was, however, clear that the number of responses had been very low and the statistical relevance of the data needed to be taken in to consideration.

9.5 Whilst bearing in mind the statistical relevance of the data provided, given the level of response, Members were pleased to find that the majority of respondents had a positive experience when accessing Council services (as shown in Chart 1).

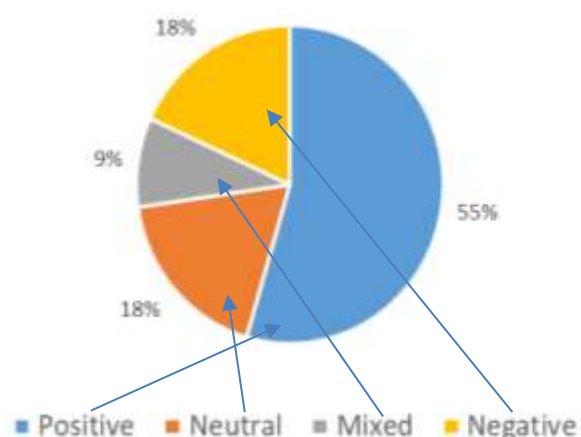


Chart 1 - How was your experience?

9.6 Members noted that compared to other projects, and in view of how heavily the consultation had been promoted, it had been expected that responses would have been higher. Overall, the majority of visits were from the project page and unusually, only a small number of visitors came via social media. In addition to this, the Committee noted that face to face engagement, including the Mystery Shopper, had proven to be an exceptionally beneficial addition to the wide mix of online and offline consultation measures implemented.

9.7 The Committee also noted with interest that:

- i) Of those who had asked for assistance, the majority (26%) had asked for help from their social worker or from staff in one of the community hubs (18%). It

¹² individuals may participate in more than one activity

was felt that this was very positive, as this is one of the primary purposes of the hubs.

- ii) Only 3% of respondents had asked for help with online services. This was surprising as many of the departmental survey responses highlighted that assistance was being used by the public. It is, however, unclear if the low level of those asking for assistance was due to the user friendly nature of online services, or whether they were just not being used.
- iii) 66% of respondents had requested assistance since 2018. Members found it encouraging that people felt increasingly able, and willing to ask for assistance. The most commonly selected factors that made for a positive experience were; accessing the service online, information being easy to find, understand and use, staff explained things in a way that could be understood. The Committee was pleased to find that throughout the consultation helpfulness of staff (especially reception staff) was voiced.
- iv) In terms of what could be done to build on positive experiences or improve further, the most common suggestions were:
 - The provision of staff training and awareness / empathy around disability and access needs;
 - Physical access to buildings (including ensuring that all Entry doors to the council buildings have automatic doors or a button visible to press to be able to open the door from a wheelchair);
 - Increased use of digital technology, which had been a recurring suggestion; and
 - Increasing capacity to reduce waiting times and making physical access improvements.
- v) Members were disappointed that a lack of staff knowledge about, or appreciation of, service users' needs had been a recurring theme in terms of negative experiences in accessing services. There was also concern that problems with online services (e.g. not being able to find information on the website), phones not being answered promptly and not being able to speak to the person they wanted to, were recurring issues. Members were, however, optimistic that many of these issues could be easily rectified.

9.8 The Committee considered the following potential options for improvement:-

- i) Increased promotion of Community Hubs as a place where people can find support to access other council services. It was highlighted that the Hubs are already set up to provide this service and Members were of the view that it would be beneficial to promote this service more to make other people aware that it is available.
- ii) Promote the assistance that is available for people who need help going online. As a service that many departments are already able to provide, Members were of the view that it could be beneficial to promote this service more, particularly to those who may find using online services particularly difficult. There was, however, a need to bear in mind that digital exclusion is an issue locally and some residents cannot easily access services online.

- iii) Look at what the uptake is for home visits for service users who cannot attend in person. Again this was something that many services were able to offer, although data from the survey suggested that uptake was low. It was unclear if this was because the services were able to help people in other ways or because people were not aware that it was an option. The Committee recognised that additional work to explore this was needed.
- iv) Improved staff training and awareness around disability, including access needs and lived experiences. Members were pleased to find that almost everyone had been quick to praise staff but supported the need for additional training and awareness raising.
- v) Linking postal letters to online accounts; the letter would appear in their online account (as well as being posted if this is a legal requirement) with the option to respond via the account. The Committee recognised that additional work to explore this was needed.
- vi) A “live chat” function via the website. It was suggested that this could be useful for all customers, but particularly for deaf people who use written English, as an instant means of communicating with customer services. The Committee recognised that additional work to explore this was needed.
- vii) Improve physical access to council buildings (Civic Centre and Bevan House in particular). The Committee recognised that additional work was needed to explore any potential outstanding access.
- viii) Improvements to the website and making information easier to find online. The Committee appreciated the issues raised in relation to accessibility of the website (including the absence of a document read function for people with disabilities). Members supported the need for a review of the Council website to ensure that all content meets web content accessibility guidelines going forward.

9.9 **Organisational / Professional Survey** - Organisations were asked to complete a survey based on their experience of assisting clients to use Council services or any anecdotal feedback they had received from their clients about their own experiences of accessing services. Despite being heavily promoted to a wide range of organisations only one response was received from Hartlepool Deaf Centre and details of the free text comments received are outlined in **Appendix 3**.

9.10 It came as no surprise to the Committee that many of the points raised mirrored those received via the public survey. These included:

- i) Good customer service and friendly, helpful and understanding staff.
- ii) Confusion on behalf of the Council. This could take the form of lost paper work, directing someone to the wrong room or failing to get back to people.
- iii) The need for the Council to be more creative in how it interacts with deaf people, for example advertising events as being deaf-friendly (and making them so). Also, reducing the reliance on interpreters by investigating other solutions.

- iv) There is a need to listen to people with disabilities and long term conditions and ensure that updating them on the outcome of consultation is undertaken as a matter of course. Concern had been expressed that none of the improvements identified by the Task and Finish Group established to improve accessibility for deaf people at the Community Hub have been implemented and no feedback provided.

9.11 **Consultation Workshops** - As a further mechanism to obtain public input a range of workshops were held with local community support organisations (CLIP, Hartlepool Deaf Centre, Hartlepool and Hartlepool Healthwatch) alongside an open session in the Central Hub / Library. BSL interpreters were provided for the workshops and a BSL signed video was embedded into the consultation project page and shared widely on social media to increase awareness amongst the Deaf community

9.12 Each workshop explored:-

- i) What the local authority does well?
- ii) What are the challenges in accessing council services
- iii) How good is the local authority at providing help?
- iv) How should the local authority approach identifying and understanding people's needs?

9.13 Members welcomed the breadth and balance of comments received and found the examples of lived experience gathered via the workshops particularly informative. Details of the evidence provided as a result of the workshops is summarised in **Appendix 4.**

9.14 **Mystery Shopper** - A mystery shopper exercise was carried out with volunteer shoppers recruited from some of the groups that took part in the earlier consultation sessions (Healthwatch and the deaf community (via the Deaf Centre)). The below scenarios were designed, and chosen by volunteers, for a range of frontline Council services and guidance provided on how to carry out the mystery shopper events and submit feedback.

- i) Apply for / renew a bus pass
- ii) Visit Hartlepool Art Gallery
- iii) Visit a leisure centre
- iv) Carry out a task on the HBC website x 2
- v) Reablement or occupational therapy
- vi) Visit a Community Hub or library
- vii) Make an enquiry at the Civic Centre reception

9.15 Members welcomed this alternative option for the gathering of evidence and suggested that it be used again where appropriate. The Committee did, however, exercise caution in relation to the results of the exercise, given the very small study and limited number of participants and services. The feedback was alongside the wider sources of evidence presented as part of the investigation. In doing so, Members learned that eight service areas had been tested by seven mystery shoppers, four of which had been "happy" or "very happy" with their visit, while 2 had been "unhappy". The results highlighted to the Committee issues in terms of:-

- i) Access to / availability of information in an accessible format - All felt information was very easy to find.
- ii) Staff interactions:
 - Arrival and first impressions were mixed with respondents' impressions either really positive or negative.
 - Staff were visible and approachability feedback was good with those who answered this question all complementary about front-of-house staff.
- iii) Getting around the site (a physical site and the HBC website):
 - Negative feedback included the lift being out of order for a long time in the Central Hub and different information appearing on the website each time the respondent looked.
 - The website, in particular, received negative feedback with respondents finding it was difficult to use with unclear navigation, missing and out of date information and expired links.
- iv) Facilities - Feedback on the facilities provided in venues (where tested) was generally positive. However, the toilet facilities in the Central Hub were described as "abysmal".
- v) Deaf access - Feedback tallied with deaf respondents comments during the wider consultation. Staff were unable to deal with their disability and the lack of easy and immediate access to a BSL interpretation service was a major stumbling block to Deaf residents being able to access services in the same way that a hearing person would be able to (even if disabled in other ways).

9.16 Summarising the results of the mystery shopper exercise, the Committee concluded that from a positive perspective, staff are consistently described as friendly and helpful and basic information about the services tested was "easy to find". From a negative perspective, the Deaf mystery shopper experienced additional difficulties in carrying out their scenarios to those shoppers with other types of disability. In addition to this, there had been a view that:

- The website is difficult to use and does not meet accessibility requirements.
- Poor outcomes (e.g. signposting and keeping people informed and updated).
- The ongoing effects of the Covid pandemic had led to reduced services.
- Multiple trips / appointments had to be made to find out simple pieces of information.

10. DEPARTMENTAL SURVEY

10.1 In addition to the consultation and engagement exercise referenced in Section 9, a piece of work was carried out to gain an understanding of accessibility across Council departments, with each department asked about:

- i) Their current access arrangements;
- ii) Who their customer base was; and
- iii) What barriers they had to making the service more accessible.

10.2 The Committee was pleased to find that a total of 47 responses had been received from across all departments, a list of which together with details of the survey results is outlined in **Appendix 5**. Based on the survey results, Members:-

- i) Welcomed confirmation that the majority of services remain face to face, by phone or email but acknowledged the role of on-line and hybrid working as part of the package of delivery mechanisms to meet the diverse needs of Hartlepool's population.
- ii) Noted that whilst some services actively ask people about additional needs when they make contact, others appear to take a more passive approach. The need for a more consistent approach was apparent to the Committee.
- iii) Had anticipated that the most common adjustment would be the provision of interpreters (13%), both British Sign Language (BSL) interpreters and other languages. However, the range of other barriers were noted with interest:
 - Limitations of existing buildings
 - Reliance on other services / agencies (e.g. to provide front of house services or alternative meeting locations)
 - Technology (either due to expense of upgrading to keep pace with guidance or a lack of knowledge of how technology can be used to enhance access)
 - Lack of engagement with the disabled community
 - Lack of specialist support / advice and insufficient need identified to justify the change were also comparatively high.
- iv) Were of the view that a review of information / communication materials produced by the Council, and production of guidance to assist officers in the production of documents, to ensure consistency of production, would be beneficial.
- v) Noted with interest that the use of the staff intranet as one of the main points for access information and training. Further to discussion, it was felt that a review of accessibility information (e.g. what is available and in what form) would be beneficial to assist in enhancing staff and Councillor training and awareness. This being particularly useful for those staff whose roles do not involve regular contact with disabled people.
- vi) Had anticipated that finance and capacity would be identified as key barriers to making services more accessible. Subsequently, the survey results came as no surprise with 21% of responses identifying finance / budget, and 8% identifying lack of capacity, as barriers. In addition to this, an improved digital offer, more engagement with the disabled community, access to experts / specialist advice and a better understanding of issues were all identified as ways of making services more accessible.
- vii) Welcomed assurances that some services were thought to be fully accessible, however, it was suggested that more could perhaps be done across all departments to identify people with additional needs, share information and seek feedback from users to see if their experience of using the service matches up with the departmental view.
- viii) Explored the provision of adjustments and:
 - Expressed concern that a number of services do not have anything in place for service users that need adjustments to be made:

- Current arrangements are enough – 1%
- Not applicable – 1%
- Information says to ask if adjustments are required (i.e. only available on request) – 1%
- Nothing currently in place – 1%

Members appreciated that this could be due to an assumption that service are fully accessible so no further adjustment would be required, it could also be that service users with additional needs do not use the service because there are no adjustments available. With this in mind, Members reiterated the need for consistency of approach in assessing / asking about additional needs at the first point of contact.

- Found that most adjustments were made on an as-required basis and almost half of adjustments had been in place for a “long time / unknown”. Members were of the view that as most adjustments seem to be made on an ad-hoc basis, or have been in place for a very long time, a refresh of how and when adjustments are embedded may be timely.
- Learned that by far the most common ways of making service users aware of adjustments were:
 - Via information / communications – 22%
 - Via the Council website – 20%
 - Through initial contact with staff (i.e. people are told when they first speak to a member of staff) – 19%
 - Through general contact with staff (unspecified which stage of contact) – 19%

The Committee suggested that it might be useful to carry out a review of information / communications materials put out by the Council to see what proportion of materials include accessibility information and what form this takes.

- ix) Noted indications that the majority of staff know what adjustments, alternative arrangements or additional support can be put in place to support someone who needs it. Interestingly 6% of comments referenced finding information on the staff intranet, however, indications were that this is not always easy. The Committee was of the view that it might be beneficial to carry out a review of accessibility information on the staff intranet to ensure that the information provided is current and up to date and also that general information that would be useful to all staff is included and, most importantly, easy to find. This could include, for example, plain-English writing guides, web content guidelines, carrying out access audits, etc. This could be particularly useful for those staff whose roles do not involve regular contact with disabled people so the information is ready to hand when needed.

11. EVALUATION OF CONSULTATION / ENGAGEMENT RESULTS

- 11.1 With due regard to the issues raised via the consultation and engagement process, Table 6 (over the page) summarises the key findings presented and a number of potential actions identified by the Committee.

Table 6 – Evaluation of Consultation and Engagement Results

Key findings from the consultation	Potential Action
<p>1. People are not always aware that they can have help. Whether because they don't know that help is available or because they think they won't be eligible.</p> <p>A number of issues had been raised in relation to public and staff awareness of arrangements to facilitate the accessibility of services, including access to Council buildings for assistance dogs. Contact was made with Civic Centre, Hartlepool Central Library, Hartlepool Art Gallery, The Bis and The CIL and all services advised they would welcome those with assistance dogs.</p>	<p>Increased promotion of:</p> <ul style="list-style-type: none"> - Assistance schemes and the help available to access services – ensure that this promotion is targeted towards disabled service users i.e. in a form and location that is accessible to them. - Community hubs as a place where people can find support to access other council services. - The role of Community navigators - The various support available to help people with getting online e.g. at the Community Hubs and through community projects such as Hartlepower and Project 65. <p>Explore the uptake for home visits for service users who cannot attend in person with a view to identifying the need for increased promotion.</p> <p>Clearly display in buildings signs that shows help is available for people with disabilities / long term conditions.</p>
<p>2. Whether the level of service a disabled person receives is poor or excellent very much depends on who they get when they make contact.</p> <p>There seems to be a gap between focussed individual provisions (which is usually very good) and generic or universal services which are not so good. Also services which are used to dealing with disabled people regularly are better at it than those which only rarely have a disabled person make contact.</p>	<p>Improved staff training and awareness around disability, including access needs and lived experiences, including the development of a staff training and disability awareness package.</p> <p>Publicise a set of standards of service that disabled people can expect to receive and ensure that these standards are maintained.</p>
<p>3. Lessons learned from dealing with individual issues are not being embedded for lasting change. This means that issues recur for the same individual or for others.</p>	<p>Ensure lesson learning is shared through team meetings, board meetings and staff supervision sessions and that this is embedded into processes.</p>
<p>4. Consistency is a problem when a disabled person's enquiry or service request goes across teams or departments with people being told one thing by one team and something else by another.</p>	<p>Investigate how this can be mitigated.</p>

Disabled people find having to constantly repeat their stories to different staff members exhausting and demoralising, This is a barrier to some in making contact.	
5. The Council's website and Hartlepool Online are difficult to use for people with disabilities and do not meet WCAG requirements.	<p>Review the Council website and Hartlepool Online to ensure that they are compliant with WCAG guidance. In doing so:</p> <ul style="list-style-type: none"> - Include consumer testing in the review of the web site and Hartlepool Online to check functionality. - Explore the potential of a "live chat" function via the website.
6. Going digital and moving services online can be beneficial for disabled people, however, digital inclusion / exclusion remains an issue.	Ensure that digital access is not the only means that people can find information or make contact with the Council.
<p>7. The Deaf Community have particular difficulties in contacting the council and accessing services due to a lack of BSL interpretation facilities in community buildings and an over-reliance on written English and telephone contact.</p> <p>Particular attention was drawn to the provision of assistance to those who cannot use telephones to make contact with the Council, or progress contact, via telephone. A text relay service and text messaging service had previously been available.</p>	<p>i) Investigate the feasibility of introducing video calling, to sit alongside traditional phone and email functions to allow a Deaf person to communicate with a BSL signer, and Relay UK.</p> <p>ii) The Text Relay Service has already been reintroduced, however, it could be better advertised.</p> <p>iii) Increase the number of BSL trained front line staff with the aim that there will always be at least one BSL trained staff member in each community building at any one time.</p>
8. Council efforts to make things easier for people with autism and dementia are laudable but people with other forms of disability feel forgotten, particularly the Deaf Community, parents of profoundly disabled children and those with Downs syndrome.	<p>Ensure that any disability awareness training includes a wide range of disabilities.</p> <p>Involve people with a wide range of disabilities, and groups such as CLIP, in conversations around improving access / services.</p>
9. Some disabled people feel that although they are regularly asked to give feedback or input into consultations around accessibility nothing every changes and their recommendations are not implemented	<p>Ensure that where consultation is carried out that the "feedback loop" is closed so that people's contributions are acknowledged and acted upon.</p> <p>Ensure that they are informed of the outcome of the consultation to tell them what has been changed and where change has not been possible why it was not possible.</p>

	Where changes requested are not possible ensure that the conversation is continued to try and find alternative outcomes rather than just making that the end of the discussion.
10. A lack of public toilets in Hartlepool is having an impact on disabled people's ability to get out and about and engage in their communities. Where toilets are available the accessible toilet is often locked	Look to try and increase the provision of public toilets, or at least make the existing ones more accessible.
11. Disabled parking is an issue, the location of parking meters in relation to the disabled bays and the size of the text on the sign boards	Investigate how this can be improved.
12. In conversations around disability and accessibility, children and young disabled people are being forgotten, particularly the 16-18 age group who are between school and adult social care support	Expand consultations and conversations to include children and young people to get their perspective.
13. There appears to be an issue with people not getting called back and enquiries / requests not being followed up. This is unlikely to be confined to disabled people but the impact on disabled people is much greater, particularly for those with problems with memory / understanding. Disabled people and carers reported not getting called back caused feelings of frustration and stress, and having to be the one to chase things up all the time was exhausting and "yet another thing to have to remember to do".	Ensure that staff training on disability and awareness includes the importance of calling people back and an understanding of why it is such an issue for disabled people and carers. Ensure this training is rolled out to all staff, not just front line staff.
14. Household waste recycling centre is less accessible than it used to be. Having to book an appointment in advance is difficult for those who can't plan ahead because of their health conditions or caring responsibilities. This is compounded for those who can't get online easily. No assistance on site anymore means people with reduced strength or limited mobility cannot get the items out of the car.	Review the need for pre-booked appointments at HWRC. If this is being retained as a cost cutting measure consider how the accessibility implications can be mitigated e.g. pre-booked for weekends and drop-in on weekdays or "just turn up" passes for disabled people.
15. Despite access aids at the civic centre (including BSL trained staff, step-free access, hearing loop, etc.)	Promote the range of services that can be accessed at other venues such as the Community Hubs where there is

many elderly / disabled people consider the civic to be inaccessible due to the lack of disabled parking at the building.	disabled parking so people can go elsewhere. Investigate how the disabled parking at the rear of the building can be better utilised (without having to walk all the way around the building)
16. Awareness of the role and range of services offered by the Community Hubs and Community Navigators is low.	Deliver a communications campaign to raise awareness. Make sure this is targeted to elderly / disabled people (i.e. in a suitable format and location).
17. The need to look more at planning and implementation to ensure accessibility is not treated as an after-thought or add-on. If services are easy to access for people with accessibility issues then it is easy to access for everyone.	Undertake an internal review of literature and processes within the Council to see if they meet requirements/legal guidance/council plans similar to the physical building audit but of our literature and website.

11.2 Whilst it was recognised that some adjustments could require more significant investment which would not be possible at this time, given the Council's current financial position, it was suggested that others may be possible quickly, easily and for very little cost. During the course of the consultation a number of potential "quick wins" were identified that could be implemented whilst more fundamental improvements are considered. Those were as follows:-

- i) Plan and implement an ongoing communications campaign, in an accessible format / location, to highlight all the various support schemes and reasonable adjustments that we already have in place and ensure this is repeated regularly. Services which offer adjustments for disabled people should ensure that this is included in all the information they put out. Ensure this is put out in a range of communications methods, not just on social media.
- ii) When time-critical videos are posted on social media and there is not time to set up closed captions first the video should include a text card to say that subtitles will be added as soon as possible – and ensure that this is followed up. This should be standard for all videos. For videos which are not time-critical subtitles should be added before they are uploaded.
- iii) Some people find the range of Council touch-points confusing and don't know where they need to be for particular services. Communicate that there are a number of "one-stop-shop" touch points such as civic centre reception and the Community Hubs where people can get everything done in one place, this will also make people who find accessing the civic difficult aware that they can get the same services elsewhere.
- iv) Promote the role of the Community Hubs and Community Navigators more to increase understanding of the services they offer.
- v) Ensure that community buildings and touch points have a range of posters and leaflets on display for a range of disability support groups and charities.
- vi) Introduce a facility for people coming in to reception to ask for a private room using the small rooms off the reception area if they wish to discuss something

confidential and make people aware that this is available (e.g. by putting signs on the glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).

- vii) Circulate some basic guidance to staff on font size and type, use of plain English and how to book an interpreter when one is required and put this information in an easy to find location on the intranet.

12. CONCLUSIONS

12.1 The Audit and Governance Committee concluded that:-

- 1) Hartlepool Borough Council has developed services and facilities aimed at supporting residents with disabilities and long term conditions and has invested in state-of-the-art facilities such as the Centre for Independent Living (CIL). There is, however, always more that can be done to ensure that the voices of residents are sought, heard and incorporated into future Council initiatives which may impact on the future physical, economic and social environment of the town.
- 2) Hartlepool staff are to be commended on their activities to support and signpost residents with disabilities and long term conditions. Experience being that where services are easy to access for those with disabilities or long term conditions, they are easier for all to access!
- 3) Accessibility is so much more than just physical access and must be given high priority in the development and provision of services. As such:
 - It is essential to have a clear understanding of Hartlepool's disabled community, its needs and challenges if the right services are to be provided in the right way. Only with this will the true level of need be identified to support the requirement for service change and adjustments.
 - Departments need to be supported within the available resources to make any necessary improvements and provided with specialist advice and support where required.
 - The needs of people with disabilities and long term conditions need to be represented in the development and delivery of services. A good example, as identified by the disabled community, is the involvement of CLIP in the development of the Highlight building. This being identified as good practice by the disabled community.
 - Where residents with a disability or long term condition are involved in consultation / engagement as part of the development of services, there is a need to ensure that they are updated on the outcome of consultations and decisions as a matter of course. This should be done at an early stage in the process with participants involved in ongoing conversations throughout the development, deliver and review of services. Not as a one off event.
 - Workforce development is essential in terms of training to increase disability awareness and an understanding of what reasonable adjustments can be made.

- 4) Hartlepool Borough Council should at every opportunity champion the provision of accessible services with its partners, local business' and other organisations across the town.
- 5) Emphasis needs to be placed on the promotion of the social model of disability, changing attitudes towards disabled people and improving disability awareness.
- 6) There needs to be a consistent approach to asking people about additional needs at the first point of contact. Services that are accessed regularly by disabled people and those with long term conditions should share best practice.
- 7) The completion of Impact Assessments to inform the decision making process is an essential part of the service development process. These assessments need to be undertaken as early as possible in the development of services and in order to simplify the process, it has been agreed that the Child and Family Poverty Impact Assessment and Equality and Diversity Impact Assessment will be amalgamated.
- 8) Many adjustments do not require significant investment in terms of time or resources. A great deal can be achieved by taking a flexible approach to service delivery and making small changes to the way in which things are done. This is where involving disabled people in conversations around service delivery could be particularly beneficial.
- 9) Subject to compliance with the requirements of the Equality Act, any proposals for the provision of additional activities, or service changes, must be considered alongside the financial challenges facing the local authority and be within available resources.
- 10) Making every contact count (MECC) needs to be a priority with improved communication between departments to remove the need for residents to repeat their issues.
- 11) Following calls for involvement in the investigation from groups and individuals across the town, the most significant level of input was received from Hartlepool's Deaf community. The investigation findings have subsequently been heavily influenced by their response and it is recognised that it may be beneficial to undertake further consultation as part of the process for the implementation of the Committee's recommendations.
- 12) The mystery shopper process was a beneficial element of the consultation process undertaken as part of the investigation and should be used more frequently as a means of assessing lived experiences.

13. RECOMMENDATIONS

- 13.1 The Audit and Governance Committee has taken evidence from a wide range of sources and its recommendations are as follows:-

- 1) Exploration of some adjustments would require more significant investment and be longer term actions. Other short / medium term actions would be to:-
 - i) Develop a communications campaign to:
 - Highlight the various support schemes and reasonable adjustments that are already have in place;
 - Promote 'One-Stop-Shop' touch points such as the Civic Centre reception and Community Hubs where people can get assistance with everything in one place. Making those who find accessing the Civic Centre aware that the same service can be accessed elsewhere; and
 - Promote the role of Community Hubs and Community Navigators to increase the understanding of the services they offer.
 - ii) Ensure that community buildings and touch points have posters and leaflets on display for a range of disability support groups and charities.
 - iii) Circulate basic guidance to staff on font size and type, use of plain English, how to book an interpreter when one is required and put this information in an easy to find location on the intranet.
 - iv) Create an "accessibility" tile on the intranet homepage so it is easy to find and collate a range of useful accessibility information for staff to be able to find quickly and easily when a disabled person makes contact.
- 2) Equality of access to services for all is a fundamental right and residents with disabilities and long term conditions should not be restricted in terms of the times they can access services or the levels of privacy they can expect. To this end:-
 - i) A Text Relay Service should be introduced;
 - ii) Given the financial restrictions faced by the local authority, the feasibility and benefits, of creation of a pod facility in the Civic Centre be explored to allow residents and officers to use online signing / translation services;
 - iii) The creation of a network of BSL trained staff, to act as first point of contact for volunteers, be explored;
 - iv) Existing TV screens in the Civic Centre reception be used to promote accessibility services and the assistance that is available; and
 - v) The Loop system currently used in council buildings be reviewed to ensure that it is still compatible with modern hearing aids.
- 3) Provide access to a video / telephone translation service (for BSL and other languages) in the Civic Centre, and a private room for the discussion of confidential issues. This facility to be promoted (e.g. via signs on glass partitions in a similar way to how pharmacies tell customers they can use a private consultation room).

- 4) A review of workforce training be undertaken to explore how disability awareness and an understanding of reasonable adjustments, could be increased, within available resources. As part of this:-
 - i) Accessibility and diversity awareness training to be rolled out as mandatory training for all HBC staff and offered as an option for Councillors as part of the induction process; and
 - ii) Options for training be explored including the use of online packages to allow ease of access and roll out across departments, without the need for an external trainer.
- 5) The newly established Equality, Diversity and Inclusion Officer Group to be used as a mechanism to share best practice, monitor performance and identify service improvements.
- 6) Improvements to the HBC website be explored to ensure that it is EDI compliant going forward, including but not be limited to:-
 - i) Read options for documents, to allow access by blind or visually impaired residents;
 - ii) Captions / signing on social media posts / videos; and
 - iii) When time-critical videos are posted on social media, and there is not time to set up closed captions, the video should include a text card to say that subtitles will be added. For videos which are not time-critical subtitles should be added before they are uploaded.
- 7) Council reports, documents and forms must be accessible (easy read / screen reader friendly) and going forward clear content guidance should to be provided, and its use promoted, including:-
 - i) Where appropriate, instructions for the inclusion of links to allow the use of screen readers; and
 - ii) Promotion of use of a document accessibility checker.
- 8) A consultation to be undertaken with partners on the potential benefits, and level of support for, the creation of a needs passport / card system that could be used to ensure that officers quickly recognise and respond to any additional support needs.
- 9) The process for creation of the Highlight on the Waterfront development is an example of good practice in terms of engagement / involvement with residents with disabilities and lifelong conditions. This good practice to be rolled out across the development of all services and strategies.

ACKNOWLEDGEMENTS

The Committee would like to place on record our appreciation, in particular of the willingness and co-operation we have received from all those involved in the investigation.

**COUNCILLOR ROB COOK
CHAIR OF THE AUDIT AND GOVERNANCE COMMITTEE**

Contact Officer:

Joan Stevens, Statutory Scrutiny Manager
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Terms of Reference for the Investigation

- a) To gain an overarching understanding of national equality legislation, and in particular statutory duties as they relate to the activities of Hartlepool Borough Council.
- b) To gain an understanding of data in relation to the number of residents in Hartlepool with disabilities and long term conditions and consider existing evidence of the challenges they face in accessing services;
- c) From a Hartlepool Borough Council perspective:
 - i. Explore how the Council complies with its Equality Duty in ensuring accessibility to all areas of service provision (as detailed in the referral); and
 - ii. Evaluate the effectiveness of the Council's activities to ensure that people with disabilities and long term conditions have easy access to its services.
- d) To examine the barriers (physical, procedural and other) that may inhibit access to Hartlepool Borough Council services / activities, and day to day living, and ascertain their prevalence and impact (including the impact of Covid-19); and
- e) To identify if any changes / additions are needed to deliver tangible improvements to the accessibility of Hartlepool Borough Council Services.

How people were made aware of the consultation?

- The Your Say Our Future consultation platform, including in the monthly newsletters sent to all registered participants
- Extensive promotion on social media
- Posters and leaflets in all public Council buildings including the Community Hubs and libraries
- Posters and leaflets distributed to GP surgeries, health centres, pharmacies, etc.
- Written invitations to take part and request to share with contacts sent to:
 - Elected members
 - Residential homes, nursing care homes and other providers of adult and children's social care
 - Youth Council
 - Housing associations
 - Parish Councils
 - Alice House Hospice
 - Health and Wellbeing Board and Safer Hartlepool Partnership
 - Healthwatch Hartlepool
 - Hartlepool and Stockton CCG and North Tees and Hartlepool NHS Trust
 - Various local community and disability support groups including Hartlepool Deaf Centre, Incontrol-able, Hartlepool Carers and the Hospital of God

How the consultation was made accessible to disabled people?

- The Your Say online platform is compliant with the Web Content Accessibility Guidelines. It is compatible with screen readers and other assistive technology.
- The Committee commissioned two BSL signed videos to promote the consultation. These were shared extensively on social media, embedded onto the Your Say platform and shared by local deaf organisations with their members. BSL signers were also booked for all the workshop sessions.
- Easy-read and large print versions of the survey were available to download from the Your Say platform and also to pick up from Council buildings. Copies were given to disability groups to pass on to their members.

ORGANISATIONAL SURVEY FREE TEXT COMMENTS (DEAF CENTRE)

Please tell us about a positive experience of using a Council service.

iSPA contact centre staff are amazing, they are helpful and always willing to help get me to the right person or find a solution to a problem. One person in particular, shows real passion and commitment to the Deaf Community including studying BSL in her own time. She has a wealth of knowledge around Deaf equipment and resources and has fantastic Deaf awareness. Officers have a long track record of support to the Deaf Community but do not appear to have the resources to carry out some of the work they champion.

What do you think we could do to build on this positive experience or improve further?

Implement accessible contact methods to council services to support HDC to build confidence in people's own abilities to manage their own affairs. HDC can support this work by supporting clients to make contact, but without accessible contact methods HBC are removing people's independence, thus creating further barriers and the assumptions that the council do not care or do not know they have Deaf residents in the town. Promote council services by always ensuring subtitles are added to social media video content and any important announcements please consider BSL interpretation added to video content.

Please tell us about a negative experience of using a Council service.

I have a client at present who is unhappy with their social work support, they feel because they are Deaf the social worker is not in regular contact and does not update the client because of the communication barrier and needing to book interpreters. This client was very happy with the previous arrangements of having a Deaf council member to contact and receive support from. The client would like social care to be better deaf aware, receive Deaf Awareness training and social worker to learn BSL (Stockton, Middlesbrough and Darlington Council have social workers who can sign).

My own personal experience of offering to contact services on behalf of Deaf people is very counterproductive to the work we aim to achieve in empowering Deaf people. I get quick results because I am a hearing person with no disabilities or long-term health conditions, this again reinforces that we live in a town and have a wider society that practices audism openly despite legislation on local councils to provide accessible information, to be accessible themselves and to provide information that is accessible to the public (including those with protected characteristics).

What do you think we should have done differently or how do you think we could improve for the future?

My client asked me to feedback to the social worker and ask why my client waited so long for a follow up meeting. Eventually the social worker turned up at the client's door with an interpreter but without informing the client to expect her, the client sent her away because they were expecting a family visit. A subsequent visit was arranged and booked in with the client. My client remains unsatisfied, they feel the social worker does not understand them as a profoundly deaf person - it is important that Deaf people feel their support is from someone with good deaf awareness with an understanding of the clients background and culture. My client does not like to have an interpreter present for private discussions with their social worker but recognises this is required due to the communication barrier, however it makes them feel very

uncomfortable. Sometimes interpreters create barriers of their own, they are not the only solution to working well with Deaf people.

If there is anything that worries you or puts you off using Council services with or on behalf of your clients please tell us about it here.

Community Hub - York Road What puts me off the council... a continued lack of accessibility for Deaf people. Council events are never offered with BSL Interpreter, so the fantastic opportunities at the community hub are not open to Deaf people. Hard of hearing people say they would welcome it if the Hub to advertised they are deaf friendly - they want to see a big sign on the front door that shows the council understand the needs of deaf and hard of hearing people, and that events will be accessible, not just providing interpreters but arranged and adapted so that deaf and HoH people are fully included rather than left to fend for themselves, if they are brave enough to enter the doors

What worries me about council services... HDC carried out a Deaf Audit of the Community Hub in June 2021, delivered Deaf Awareness training to 15 library and outreach staff and have spent the charities self-funded hours to attend a 3 meeting Task and Finish group in Feb/March 2022 to be told there are no funds to implement any of the required improvements. Yesterday I attended a deaf person's support meeting lead by TEWV along with 2 social workers (one from Durham and one from Stockton), luckily I was early and could meet the client at reception because there was major confusion over the room booking and reason for the meeting, hub staff wanted to direct us to the medicine review queue. If the vulnerable deaf client had been exposed to this confusion it would have had a really negative impact on them, negative experiences get shared among the Deaf Community and is counter-productive to the work the council wants to achieve at the hub.

If you have any other comments or suggestions about making Council services accessible to people with long-term conditions and carers please write them in the box

The toilets in the community hub are not suitable for use, especially for people who are blind or have visual impairment. Accessible toilet is locked.

WORKSHOP FINDINGS

CONCERNS / CHALLENGES IN ACCESSING COUNCIL SERVICES	POSITIVE FEEDBACK / THINGS WE DO WELL
<ol style="list-style-type: none"> 1) Council website (difficult to use accessibility software) telephone systems and Hartlepool Online not easy to use. 2) Variations in the quality of service for people with disabilities and long term conditions. 3) Awareness of available help. 4) Awareness of the Community Navigators role is low. 5) Lack of clarity in terms of access for assistance dogs (other than guide dogs) in Council buildings. 6) Lack of access to computers. 7) The absence of remote video calling service. 8) Inaccurate Hartlepool Alerts (e.g. told have to pay for parking and ticket machines too far away from parking spaces – only to find that blue badge holders don't have to pay). 9) Civic Centre - Poor access to disabled parking and access to the lift to the reception. 10) The absence of a named contact that deaf people can contact to ask about deaf-related issues. 11) Making contact with the Council for those who are not able to use the telephone. 12) Difficulty getting help with confidential matters without divulging information to an unrelated third party to act as an interpreter (e.g. getting to speak to a social worker). 13) Making anonymous complaints about staff when a phone or computer cannot be used (ab example of this being a complaint about a carer requiring the form to be handed to the carer in question). 14) Charging Blue Badge holders for parking. 15) Access to BSL signers or interpreters (inc. Community Navigators) 16) Drop kerbs at Elizabeth Way Shops. 17) When involved in access audits and focus groups nothing seems to come from them. 18) Digital exclusion 19) Recreation and sport not always accessible (e.g. no disabled access to Rift House Rec. Sports and recreation grounds) 20) Dropped kerbs are often in the wrong position 	<ol style="list-style-type: none"> 1) Improved physical access to Council buildings was good and improving (though still improvements to be made). 2) Staff helpful throughout various services and focused individual provision for people with disabilities and long term health conditions is good. 3) HBC house adaptations done to a very high standard, making a big difference to the quality of life. 4) Staff offering to help with form filling and signposting, particularly in the Civic Centre reception, Hubs and over the phone. 5) Hartlepool Now website (though seems to be better known by the public than by officers). 6) Partnerships with CLIP working well to improve accessibility at an early stage are (Highlight Leisure Centre, Tall Ships, Train Station and Summerhill improvements. 7) Assisted bin collection is a good scheme but not well publicised so people don't know they can have help. 8) "Borrow boxes" from the library have been well received. 9) Central and South Hubs do a good job – North Hub not so much but West View Resource Centre is very good 10) Communication and information in general is good. 11) Dealings with adult social care have been very positive. 12) The majority of Brierton Sports Centre staff are understanding, friendly and welcoming 13) Health trainers are accommodating to people with

<ul style="list-style-type: none"> 21) Maintenance of council buildings e.g. holes in access ramps, uneven surfaces, etc. 22) Newer hearing aids are increasingly incompatible with the hearing induction loop system 23) Having to specifically ask for support. It also depends on who you get when you make contact 24) A lot of people with substance misuse problems have disabilities but services are not accessible to them because of their issues 25) Mill House - Reduced water temperature and suitable changing tables. 26) Lack of public toilets. 27) No accessible play equipment in any of the play areas in Hartlepool. 28) Need to improve the support through schools, particularly for mental health, bullying and the pressures of social media. 29) People with BSL as their birth language can struggle to read letters sent by post 30) Can't just turn up to do what they want. 31) The glass screens - difficult to lip read or sign. 32) Tend to think of disabled people as being older, younger disabled people are overlooked 33) Lack of consistency between members of staff and services e.g. getting passed from pillar to post 	<p>disabilities and will adjust the programmes to suit people's abilities</p> <ul style="list-style-type: none"> 14) Disabled facilities at CIL are very good and having social workers based in there means people using the day services have easy access to them for support. 15) Council is good at resolving issues for individuals 16) Introduced of dementia-friendly sessions at Mill House
IMPROVEMENTS THAT COULD BE MADE	
<ul style="list-style-type: none"> 1) An SMS notification service would be useful for people who cannot use the phone or other technology 2) Instant video remote interpreter service so don't have to wait for an interpreter 3) Need for the community to be involved in making services accessible 4) A lift to get from Victoria Road to the level of the reception area 5) Better system for anonymous feedback 6) Use Hartbeat more to publicise help arrangements as it goes to every household (an electronic version be made available screen readers) 7) Encourage private organisations to be better at accessibility 8) Council is good at resolving issues for individuals but need to embed learning to prevent issues recurring 9) Need to consider the "spontaneity" of services (so disabled person can just turn up and do what they need to do) 10) Public toilets 11) Focus on the person and not what's "wrong" with them 12) Need someone to oversee accessibility within the council, leaving it to departments to self-police is not working 13) Involving groups like CLIP in the development of services 14) Should be asking: 	

- a. What do we know about our local populations and communities and their needs?
 - b. **What training do staff get** on accessibility as a matter of course?
 - c. How can we **improve access to governance and democracy** e.g. increase disabled members of committees.
- 15) **Workforce development** needs to have regard for all disabilities.
 - 16) **Support staff with disabilities** including through workforce development, recruitment and business development
 - 17) System for hidden disabilities like the **lanyards**.
 - 18) Dementia friendly services at Mill House badly attended – **need to develop these types of programmes in consultation with disabled people**
 - 19) **Listen to the deaf community** and implement recommendations
 - 20) **A private room for deaf people** where you can ask the receptionist for when you first arrive (when signing in the reception area anyone who knows sign language can see)
 - 21) More frontline **staff trained in BSL**.
 - 22) **Employ a deaf person to be a contact for other deaf people** (translation for people who speak BSL from birth)

EXAMPLES OF LIVED EXPERIENCE (Names have been changed to protect individual's privacy but these are based on conversations with real disabled people via the consultation)

Example 1 - My bin day. Dave, who is Deaf, wanted to check which day his bin was due to be emptied. He is unable to use the website to check this online. As he cannot use the telephone he says he only has two options to find this information out: either he needs to ask a friend or family member to find the information out for him (which makes him feel unempowered) or he has to take the bus into town to visit the Civic Centre reception and hope that there is a member of staff available who can use BSL who can tell him this information. Dave says it should not be so difficult to find out a simple piece of information that a hearing person could find out in 2 minutes. He would like the option to use an SMS service or a video call (to someone who can sign) to find the information he needs quickly.

Example 2 - Benefits check. Hazel is Deaf and uses BSL to communicate. She is also elderly and a wheelchair user. Hazel would like to find out if she is entitled to any additional benefits or support since her husband passed away. She says that from her previous dealings with the staff at the Civic Centre she expects that they will be helpful, however, she is unable to use the telephone to make an appointment for a home visit. It is difficult for Hazel to get to the Civic Centre as the accessible transport options in the town are limited. She does not know how she can contact the benefits team.

Example 3 - Crisis support information. Fred is Deaf and has a history of poor mental health. Recently Fred experienced a mental health crisis and received assistance from the Police. Afterwards, he was sent a letter by the Council with information about mental health support services and the Council's ISPA team. For all of the services listed in the letter there was only a telephone number to be able to contact them. As a Deaf person, Fred is not able to use the telephone and it made him feel even worse to be offered help that he could not access.

Example 4 - Phoning the Council. Frank has had a stroke which has left him with slurred speech and needs extra time to process the information he is given. Frank can use the telephone if he has to but he says he feels embarrassed to call the Council on the phone because he thinks that his speech impediment and cognitive difficulties mean that staff will think he is drunk or on drugs when he calls and dismiss him as a nuisance. For this reason Frank avoids using the telephone unless he absolutely needs to.

Example 5 - Social workers and carers. Annie is in her 80s. She is Deaf and uses BSL to communicate but she is able to read and write English. She also uses a wheelchair or walker when she goes out. Annie used to have a social worker who could sign but they recently left the authority and the social workers who have been covering do not sign so they need an interpreter to communicate. Annie says sometimes when the social workers and carers come to visit her they do not bring an interpreter with them so Annie does not feel confident that she has understood what they have told her; or that they are understanding and recording her needs correctly.

Annie is also worried that when they do remember to bring a BSL interpreter the interpreters then know her intimate personal business (such as financial information and care needs) as she thinks they discuss this with other Deaf people. She would prefer to have a social worker who can sign which would remove the need for an interpreter. Annie is also having problems with her care package and is worried about her benefits since her husband died. She feels overwhelmed trying to tackle these difficulties when responsibility is shared over so many services and none of them are Deaf-friendly.

SOURCES OF DEPARTMENTAL SURVEY RESPONSES

ACBS	C&JCS	Public Health	NRS	R&D
<ul style="list-style-type: none"> • Heritage and open spaces • Museum / Art Gallery • Adult social care • Community hubs • Sports and leisure 	<ul style="list-style-type: none"> • Children's Hub • Safeguarding, Assessment & Support and family time contact • Rossmere Children's Centre • Hindpool Children's Centre • 0-19 • Through Care Team • Fostering • Virtual school • HSSCP (Hartlepool & Stockton Safeguarding Children Panel) • SENDIASS • Housing • Childcare • Local welfare support • Resettlement • Educational psychology • SEND • School improvement • School place, planning and capital • Youth services • Youth justice service 	<ul style="list-style-type: none"> • Public health • Substance misuse 	<ul style="list-style-type: none"> • Consultancy services • Policy support and facilities management • Passenger transport • Construction & highways • Planning and development • Environmental services • Environmental protection • Housing standards • Emergency planning • Commercial services • Car parking • Community safety 	<ul style="list-style-type: none"> • Legal • Communications and marketing • Customer services • Debt recovery • Economic growth • Health, safety and risk • Corporate strategy and performance • Revenues & benefits • Revenues

DEPARTMENTAL ACCESSIBILITY SURVEY - SUMMARY OF FINDINGS**i) Where services are delivered:**

- The majority of services (26%) continue to be delivered face to face. Data indicating that the delivery of services by phone represents 22% of activity, compared to email (18%) or online contact via the portal or app which represented 18% and 15% respectively.
- 59% of services are universal / open to all with only 19% targeted.
- The top 4 locations in descending order are the Civic Centre, people's homes, other buildings and community venues.

ii) How are services provided:

- Hybrid delivery model (almost 50%), mostly a combination of office/home-based staff, although some front-facing services are a combination of face-to-face and online contact.
- 24% are providing more online services, 6% are totally on line.
- Located or delivered from buildings that are physically accessible (e.g. step-free access, hearing loop, etc. – 10%). Other responses which referenced physical access adjustments included:
 - Access to an induction loop – 5%
 - Accessible toilets at the service location – 3%
 - Disabled parking facilities at the service location – 1%
 - Lighting adjustments can be made at the service location – 1%
 - Accessible vehicles for service users – 1%

iii) **How is need identified:**

- Predominantly by speaking to other professionals (17%) rather than from asking the client. The second most common way is via an assessment or eligibility criteria.
- Some services actively ask people about additional needs when they make contact via conversations with service users / potential users (12%), forms that service users / potential users are asked to complete (12%) or carrying out access audits of the service (4%).
- Other services appear to take a more passive approach by waiting for service users / potential users to make the first move and tell about their needs.

iv) **How are adjustments to services made:**

- The most common adjustment is the provision of interpreters (13%), both British Sign Language (BSL) interpreters and other languages. A further 5% reference the provision of BSL and 4% referenced unspecified “translation”.
- Other adjustments, not necessarily relating to physical access, include:
 - Home visits for service users – 9%
 - Reading or understanding information – 5%
 - Appointments in flexible locations – 4%
 - Technology to make the service more accessible – 3%
 - Help doing things online (2%) and filling out forms (2%)
- Information in alternative formats (unspecified – 4%), large print (8%) and easy-read (5%).

v) **Staff Training / Awareness of Adjustments** - 95% of responses indicate that all staff know what adjustments, alternative arrangements or additional support can be put in place. 6% of comments referenced finding information on the staff intranet.vi) **What do you need to make your service more accessible** - Similarly to the previous questions, the most commonly referenced responses were finance / budget (20%) and more staff (13%). A further 17% of responses referenced improving the digital offer. More engagement with the disabled community – 7%

- Access to experts / specialist advice – 7%
- Better understanding of issues – 3%
- Finance / budget (20%), more staff (13%), improved digital offer (17%), more engagement with the disabled community (7%), access to experts / specialist advice (7%) and better understanding of issues (3%).

vii) **What are the key barriers to your service being accessible to all:**

- 11% stated that services are already fully accessible so no more needs to be done.
- Barriers identified included:
 - Finance / budget (21%), lack of capacity (8%).
 - Limitations of existing buildings (some are historic buildings which may have restrictions due to Listed Building status, others are just old and from a time when accessibility was not a consideration which makes retro-fitting access improvements difficult and expensive)
 - Reliance on other services / agencies (e.g. to provide front of house services or alternative meeting locations)
 - Technology (could be either due to the expense of upgrading technology to keep pace with guidance or a lack of knowledge of how technology can be used to enhance access)
 - Lack of engagement with the disabled community

FINANCE AND POLICY COMMITTEE

18 SEPTEMBER 2023



Subject: PETITION
Report of: Managing Director
Decision Type: Non-Key Decision

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:

- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

- 2.1 To inform Members of the receipt of a petition from the public.

3. BACKGROUND

- 3.1 As stated in the Guidance Note – Petitions included in Part 5 of the Council's Constitution, there had previously been a statutory requirement for principal local authorities to adopt a petition scheme with a duty to respond to those petitions. This duty had been, however, subsequently revoked under the Localism Act 2011. The Council did still receive petitions from the public on a wide range of subjects and officers responded to them in accordance with the guidance note.

4. ISSUES FOR CONSIDERATION

- 4.1 A petition has been submitted to the Council. The terms of the petition are stated on two different forms though the lead petitioners have asked for them to be considered together –

1. "2022 REFERENDUM REQUEST REF. R/R BILL 40

This is from the public of Hartlepool to state that they have no confidence in the council in the way they deal with the public, Council Tax one of the highest

in the country, debt, and vanity projects a waste of money. child poverty is a major problem, food banks are being used more & more, roads not been cleaned, main services being cut. Democracy being denied, freedom of being denied & legal rights ignored.”

2. “Hartlepool Council Residents “VOTE OF NO CONFIDENCE”

To: Residents of Hartlepool.

Hartlepool Council is not giving the support to the needs of its council taxpayers, 5% + £32 to empty brown bins.

Why is this important?

Residents of Hartlepool are not getting value for money, even though we pay one of the highest council tax country.

- 4.2 The two petitions have been signed by a total of 3890 people. A copy of the two petitions is available for Members to view. Please contact the Director of Legal, Governance and Human Resources or the Democratic Services Team. **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. 1, information relating to any individual.**

5. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	Reputational – by not responding formally to a petition of this size.
FINANCIAL CONSIDERATIONS	None.
LEGAL CONSIDERATIONS	There is no statutory duty on the Council to take any specific action in relation to this petition.
CHILD AND FAMILY POVERTY	None.
EQUALITY AND DIVERSITY CONSIDERATIONS	None.
STAFF CONSIDERATIONS	None.
ASSET MANAGEMENT CONSIDERATIONS	None.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE	None.

CHANGE CONSIDERATIONS	
CONSULTATION	None.

6. RECOMMENDATIONS

- 6.1 That Members note the receipt of the petition and determine how they wish to respond.

7. REASONS FOR RECOMMENDATIONS

- 7.1 A petition of this size should be formally acknowledged by Elected Members.

8. BACKGROUND PAPERS

- 8.1 Guidance Note – Petitions, Part 5 of the Council's Constitution.

9. CONTACT OFFICERS

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Sign Off:-

Managing Director	Date: 06/09/2023
Director of Finance, IT and Digital	Date: 07/09/2023
Director of Legal, Governance and HR	Date: 06/09/2023

FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: DEVELOPING THE NEW COUNCIL PLAN 2024-2029
– PROPOSED TIMETABLE AND FIRST STAGE
CONSULTATION PROCESS

Report of: Managing Director

Decision Type: Non-Key (a key decision will follow the proposed first
stage consultation process)

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

- 2.1 The purpose of this report is for Finance and Policy Committee to consider and agree the process for developing the new Council Plan 2024/25 – 2028/29 including a Borough-wide consultation and engagement exercise.

3. BACKGROUND

- 3.1 This is the third and final year of the current Council Plan and the Council therefore needs to begin the process of preparing a new one. Feedback from the recent Peer Review highlighted that “Taking time to establish a defined vision for the Borough – alongside councillors, residents, businesses, the third sector and other partners and staff – will help promote shared ownership and understanding of everyone’s role in delivering it”. This was then reiterated in the following recommendations:
- Develop a clear vision and narrative for the whole Borough of Hartlepool which all councillors, staff and partners can get behind, ensuring there is a clear link to strategies, plans and understanding of local community needs. This will help promote a positive place identity and collective ownership of it, enhance HBC’s place shaping influence and provide a framework through which to deliver this.
 - Refresh the organisational plan for HBC – setting out the next stage of the journey for the Council, linked to a clear approach to transformation and values. Setting out how it will operate, and what it will do, will provide clarity on how HBC’s ambitions will be delivered.
- 3.2 During the summer of 2016 a borough wide conversation, ‘Your Say, Our Future’, involving residents, our staff and children and young people was held. The feedback received during that process was used to inform the preparation of the Council Plan 2017-2020. A similar approach was undertaken in 2019 and this informed the current Council Plan 2021-2024.
- 3.3 In order to reflect the long-term nature of the priorities in the Council Plan it is proposed that the new Council Plan be extended from 3 years to 5 years with regular reviews focusing on how the priorities will be delivered.

4. BIG CONVERSATION – YOUR SAY, OUR FUTURE

- 4.1 To inform the preparation the new Council Plan it is proposed that the Council adopts a similar approach to previous years and holds a ‘Big Conversation – Your Say, Our Future’. This will form the first stage of consultation on the new Council Plan. The aim will be to engage and get the views of a wider range of stakeholders including:
- Residents
 - Employees
 - Elected Members
 - Partners from the public, private voluntary and community sectors
- 4.2 Taking the time to undertake a largescale consultation and engagement exercise will enable the Council to utilise the findings report not only in the preparation of a new Council Plan but also to inform the development of other

key strategies and plans for the Borough including the Health and Wellbeing Strategy, Community Safety Plan and Medium Term Financial Strategy and future bids for external funding.

4.3 The Big Conversation will focus on the following core questions:

- What do you think is going well in Hartlepool?
- What do you love about Hartlepool?
- What do you think needs to improve in Hartlepool?
- Are the 6 Council Plan priorities still the right ones?
- How do you think that the Council, residents and partners can work together to make a difference?

4.4 It is proposed that the following activities form part of the consultation and engagement exercise:

- Survey with both online and paper copies available;
- Other online tools through the Council's Your Say engagement portal including maps and discussion forums with the opportunity to upload photos and images;
- Roundtable discussions with a wide range of stakeholders – going to them where possible;
- Brief face to face chats with residents at venues such as the Community Hubs, other Council buildings, Middleton Grange Shopping Centre, supermarkets across the borough and in partner venues with responses recorded on handheld devices;
- Postcards and noticeboard consultations available at locations across the Borough where they will be invited to share their views on the key questions;
- Staff engagement through a series of ELT roadshows in the autumn and the use of postcards and noticeboard consultations.

4.5 It is proposed that the survey be expanded beyond the core questions to include:

- Satisfaction with the local area as a place to live
- Satisfaction with the way that the council runs things and the services that we deliver
- How well informed the council keeps residents and how much residents trust in the council
- Views about services across the Council including those for the environment, adults and children
- Views about local issues and concerns including community safety, health and wellbeing

4.6 The survey will give us a snapshot of resident opinion at a single point in time and it should be noted that we will not be able to use this survey to give us ward level data or for it to be comparable with the national survey conducted on behalf of the LGA which is delivered by telephone. Unfortunately, the cost

of delivering a household survey which could provide this information would be significant and there is no budget available to fund it.

- 4.7 The underlying principle of the consultation plan will be for us to engage with people where they are rather than trying to hold large-scale events and expect people to come to us. It is proposed that where possible engagement with specific stakeholder groups is undertaken by those officers from across the Council who already have a relationship with those groups. Therefore it is expected that this exercise will be supported by staff across the council and, where possible, in partner organisations.
- 4.8 Over the summer Departments have been updating the corporate list of stakeholder groups. This will be used to inform the development of a detailed consultation plan.
- 4.9 In order to encourage resident buy-in to the exercise for those who are not already involved in stakeholder groups it is also proposed that a number of smaller, hour long sessions are held around the Borough where residents will be invited to come along and talk around the 5 core questions. It is proposed that these sessions take place within the Community Hubs and are hosted by different members of ELT across the consultation period.

5. PROPOSED TIMETABLE

- 5.1 Following recent changes to the Council's Constitution the Council Plan is no longer within the Budget and Policy Framework and therefore does not need to be taken to Council for adoption. With this in mind the following outline timetable is suggested for the development of the new Council Plan:

What	Who	When
Agree the proposals for the development of the Council Plan 2024/25 - 2028/29 and the Big Conversation – Your Say, Our Future consultation exercise.	Finance and Policy Committee	18 th September 2023
Agree the detailed consultation plan for the Big Conversation – Your Say, Our Future and the related communications strategy and staffing resource requirements.	Executive Leadership Team	September 2023
The Big Conversation – Your Say, Our Future consultation exercise delivered.	Lead by Corporate Strategy & Performance Team	October / November 2023 (8 weeks)

What	Who	When
Preparation of consultation findings report	Lead by Corporate Strategy & Performance Team	December 2023 / January 2024
Present the findings of the Big Conversation – Your Say, Our Future consultation exercise and confirm the next steps in the development of the Council Plan 2024/25 – 2028/29	Finance and Policy Committee	19 th February 2024
Drafting of the Council Plan 2024/25 – 2028/29.	Executive Leadership Team	March – May 2024
Agree draft Council Plan 2024/25 – 2028/29 to go out to consultation.	Finance and Policy Committee	June / July 2024
Consultation on the draft Council Plan 2024/25 – 2028/29. This will be online with written comments/responses accepted.	Lead by Corporate Strategy & Performance Team	July / August 2024 (4 weeks)
Review consultation feedback and where necessary redraft Council Plan 2024/25 – 2028/29.	Executive Leadership Team	August 2024
Agree Council Plan 2024/25 – 2028/29	Finance and Policy Committee	September 2024

6. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	<p>The proposed consultation exercise will inform the development of the new Council Plan and other strategies and plans across the council. This will minimise the risk that these strategies and plans are developed without reflecting the needs of the borough or views of key stakeholders.</p> <p>Health and safety risks related to the consultation exercise will be considered and managed as appropriate.</p>
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FINANCIAL CONSIDERATIONS	Undertaking such a significant consultation exercise will require some expenditure but this will be carefully managed and funded from existing budgets. The intention to utilise existing staff and resources as much as possible and to go to where people are rather than holding large scale events should assist in minimising costs. Also, using this consultation exercise to inform the development of other strategies and plans and for future funding bids will ensure that we get the best value out of this consultation exercise.
LEGAL CONSIDERATIONS	No related issues.
CHILD AND FAMILY POVERTY	The new Council Plan will continue to work to reduce child and family poverty within Hartlepool and a Child and Family Poverty Impact Assessment will be developed alongside the draft Plan. In addition, the 'Big Conversation – Your Say, Our Future' consultation plan will consider and reflect the needs of children and families in poverty.
EQUALITY AND DIVERSITY CONSIDERATIONS	The new Council Plan will aim to have a positive impact on the whole population of Hartlepool and will articulate the Council's Equality Objectives as required through the Public Sector Equality Duty. An Equality Impact Assessment will be developed alongside the draft Plan. In addition, the 'Big Conversation – Your Say, Our Future' consultation plan will consider and reflect the needs of those from the protected characteristics.
STAFF CONSIDERATIONS	Delivering the proposed consultation exercise will require support from staff across the Council.
ASSET MANAGEMENT CONSIDERATIONS	No related issues.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No related issues.
CONSULTATION	This report outlines a proposal for a consultation exercise which will be used to inform the development of the new Council Plan.

7. RECOMMENDATIONS

- 7.1 Finance and Policy Committee is requested to consider and agree the process for developing the new Council Plan 2024/25 – 2028/29 including a Borough-wide consultation and engagement exercise

8. REASONS FOR RECOMMENDATIONS

- 8.1 Finance and Policy Committee is the responsible committee for the Council Plan.

9. BACKGROUND PAPERS

- 9.1 N/A

10. CONTACT OFFICERS

Denise McGuckin - Managing Director
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01429 523001

Sign Off:-

Managing Director	Date: 23.8.23
Director of Finance, IT and Digital	Date: 21.8.23
Director of Legal, Governance and HR	Date: 18.8.23

FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: CORPORATE COMPLAINTS MONITORING
REPORT FOR 2022/23

Report of: Monitoring Officer

Decision Type: For information

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:

- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

- 2.1 The purpose of this report is to inform Finance and Policy Committee of the 2022/23 outturn position in relation to corporate complaints and those considered by the Local Government and Social Care Ombudsman (LGSCO).

3. BACKGROUND

- 3.1 Within the Corporate Complaints, Comments and Compliments Policy there is a requirement to report to elected members on the number of complaints received by the Council along with the final outcome of those complaints. This report outlines the complaints received in 2022/23.

4. SUMMARY OF PROGRESS – CORPORATE COMPLAINTS 2022/23

- 4.1 During 2022/23 there was a decrease in the number of corporate complaints received in comparison with the previous year.

Year	Number of complaints received	Number upheld or partially upheld	Percentage upheld or partially upheld
2022/23	9	3	33%
2021/22	12	4	33%
2020/21	7	3	43%

- 4.2 **Tables 1, 2 and 3 in Appendix 1** set out further information on the corporate complaints received during 2022/23.

5. **LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN (LGSCO) – ANNUAL REVIEW LETTER 2023**

- 5.1 The LGSCO Annual Review 2023 Letter, received 19th July 2023 sets out the annual statistics on complaints made to the LGSCO about Hartlepool Borough Council (HBC) for the year ending 31st March 2023. The data shows both the complaints and the enquiries that the LGSCO has recorded along with any decisions they have made.

- 5.2 In summary:

- In 2022/23 the LGSCO received 18 complaints or enquiries about HBC, which is a reduction of 6 on the previous year.
- The LGSCO made decisions on these complaints or enquiries during 2022/23 and the outcomes were:

Decision	Number
Incomplete/Invalid	1
Advice given	1
Referred back for local resolution	5
Closed after initial enquiries	10
Detailed investigation	2
Total	19

Please note the number of complaint enquiries the LGSCO received during the year does not always match the number of decisions made as not all complaints investigations were completed within the same year.

- Of the 2 complaints subject to detailed investigation, neither were upheld and further detail is provided in **Table 4 in Appendix 1**.
- The zero uphold rate is lower than the 20% uphold rate of 2021/22 but the numbers are very small with only 2 complaints undergoing a detailed investigation (compared to 5 in 2021/22).
- There have been 8 complaints upheld or partly upheld in the last 5 years out of a total number of 102 complaints received by the LGSCO. This represents an uphold rate of 8% of the total number received over a 5 year period. If we look at the 25 complaints that were investigated in detail over the past 5 years the uphold rate is 32%. Further details are provided in **Appendix 1 Table 5 and Table 6**.

- The uphold rate across similar authorities in 2022/23 is 72% meaning that our performance is well above average both in 2022/23 and over the past five years. As in previous years Hartlepool Borough Council has the lowest upheld rate across the North East at 0% with the other 11 authorities ranging between a 50% and 100% uphold rate.

5.3 Once a complaint investigation has been completed the complainant is advised of their right to approach the LGSCO. The fact that few complainants do so provides reassurance that our approach to corporate complaints is robust. Another indicator of the robustness of our approach is the fact that very few of the complaints investigated by the LGSCO are upheld.

5.4 The LGSCO is currently developing a Complaint Handling Code. The LGSCO has been working closely with the Housing Ombudsman in order to mirror their Complaint Handling Code which was launched this year. The LGSCO will be going out to consultation with all Local Authorities and other interested parties in the autumn with a view to launching the Code by April 2024. We will be responding to the consultation and will amend our policy as necessary when the final code is launched.

6. REVIEW OF COMPLAINTS POLICIES ACROSS THE COUNCIL

6.1 We are currently undertaking a review of a number of complaints policies across the council including:

- Corporate Complaints, Comments and Compliments Policy
- Public Health Complaints Policy
- Children's Social Care Complaints Policy
- Adult Social Care Complaints Policy
- Housing Complaints Policy

6.2 We are reviewing all of the policies to ensure that they are fit for purpose, fulfil our statutory duties where necessary and are easily accessible for the public. This will involve developing simpler public facing documents that are easy to understand and accessible to all. We are also keen to strengthen our early resolution process to help ensure that issues that are brought to our attention are dealt with as quickly and efficiently as possible.

7. UNREASONABLE CUSTOMER BEHAVIOUR POLICY UPDATE

7.1 At present there are no residents on restricted contact with the Council through the unreasonable customer behaviour policy.

8. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	No relevant issues.
FINANCIAL CONSIDERATIONS	No relevant issues.
LEGAL CONSIDERATIONS	No relevant issues.
CHILD AND FAMILY POVERTY	No relevant issues.
EQUALITY AND DIVERSITY CONSIDERATIONS	No relevant issues.
STAFF CONSIDERATIONS	No relevant issues.
ASSET MANAGEMENT CONSIDERATIONS	No relevant issues.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No relevant issues.
CONSULTATION	No relevant issues.

9. RECOMMENDATIONS

- 9.1 Finance and Policy Committee are recommended to note the update on complaints received during 2022/23.

10. REASONS FOR RECOMMENDATIONS

- 10.1 Finance and Policy Committee have responsibility for the monitoring of the Corporate Complaints, Comments and Compliments Policy and the Unreasonable Customer Behaviour Policy.

11. BACKGROUND PAPERS

- 11.1 Finance and Policy Committee (21st November 2022 - Corporate Complaints Monitoring Report for 2021/22).

12. CONTACT OFFICERS

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01429 284322

Sign Off:-

Managing Director	Date: 29.8.23
Director of Finance, IT and Digital	Date: 29.8.23
Director of Legal, Governance and HR	Date: 18.8.23

Table 1: Corporate Complaints received in 2022-23

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Number of Corporate Complaints Received	Number of Corporate Complaints Upheld / Partly Upheld
Total Number of Corporate Complaints	3	0	2	4	9	3
Finance, IT and Digital Services (F,IT&DS) Department	1	0	0	0	1	1
Development, Neighbourhood and Regulatory Services (D,N&RS) Department	1	0	1	2	4	0
Children's and Joint Commissioning Services (C&JCS) Department	0	0	1	2	3	2
Adult and Community Based Services (A&CBS) Department	1	0	0	0	1	0

Table 2: Historical Comparison of Corporate Complaints

	2018/19		2019/20		2020/21		2021/22	
	Number of complaints	Upheld / Partly Upheld	Number of complaints	Upheld / Partly Upheld	Number of complaints	Upheld / Partly Upheld	Number of complaints	Upheld / Partly Upheld
Total Number of Corporate Complaints	23	9 (39%)	25	11 (44%)	7	3 (43%)	12	4 (33%)

Table 3: Details of Corporate Complaints Upheld / Partly Upheld in 2022-23

Dept.	Complaint Description	Outcome of complaint
F,IT&DS	Council Tax complaint alongside complaint about officers	Partly upheld - Investigation showed that there were no issues with how the council tax had been calculated, the main officer dealing with the case dealt with it correctly. A training need was highlighted for other staff within the section and there was to be consideration of the potential to record phone calls in the future.
C&JCS	Alleged that the bidding process for housing was not fair and equitable, there were no properties available in a preferred location and it was taking too long to match to suitable property.	Partly upheld - An apology and financial redress was provided to the complainant. A new computer system was reviewed after 3 months to ensure it was working correctly.
C&JCS	Dissatisfied with the fair access protocol (education) and lack of communication.	Upheld - An apology and financial redress was provided to the complainant. The complainant was informed that some process had already been reviewed and new arrangements put in place. The Fair Access Protocol is to be revised.

Table 4 – Outcome of LGSCO Complaints 2022-23 – Detailed Investigation only

Reference	Description of complaint	Outcome	Date completed
Not upheld after detailed investigation (2 complaints)			
21 011 869	Complaint about the handling of his council tax accounts including attachment of earnings order, liability for council tax bills, fairness over joint liability and lack of empathy.	Council was not at fault in the way his accounts were handled and the way the council comminuted with him on these matters	24/04/22
22 012 514	Refusal of an application for home to school transport.	No fault in the decision to refuse home to school transport.	10/03/23

Table 5: Historical Comparison of Complaints and Enquiries Received by LGSCO for the last 5 years – Hartlepool

	Adult Care Services	Benefits and Tax	Corporate and other services	Education and Children's Services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
2022/23	3	0	3	10	1	0	0	0	1	18
2021/22	5	1	3	6	1	1	1	2	0	20
2020/21	4	1	2	2	0	1	1	4	1	16
2019/20	4	2	3	8	2	2	0	2	0	23
2018/19	5	4	4	5	2	4	1	0	0	25

Table 6: Historical Comparison of Decisions Made by LGSCO for the last 5 years - Hartlepool

	Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed after Initial Enquiries	Detailed Investigations			Total	Average uphold rate (%) of similar authorities
					Not Upheld	Upheld	Uphold Rate		
2022/23	1	1	5	10	2	0	0%	19	72%
2021/22	0	0	5	15	4	1	20%	25	64%
2020/21	1	0	7	4	1	3	75%	16	NA
2019/20	0	2	3	10	6	3	33%	24	NA
2018/19	0	1	6	11	4	1	20%	23	NA

Table 7 - North East Local Authorities – 2022/23 LGCSO comparison

	Number of detailed investigations	Complaints Upheld		Upheld cases where the authority provided a satisfactory remedy before the complaint reached the Ombudsman (%)	Cases we were satisfied the authority successfully implemented our recommendations to remedy the complaint (compliance rate) (%)
		Number	Percentage	Percentage	Percentage
Hartlepool	2	0	0%	N/A	N/A
Durham	22	11	52%	9%	100%
Northumberland	19	16	84%	25%	100%
Newcastle	10	7	70%	29%	100%
Sunderland	8	4	50%	0%	100%
Gateshead	14	8	57%	0%	100%
South Tyneside	6	4	67%	0%	100%
North Tyneside	11	10	91%	20%	100%
Darlington	9	6	67%	17%	100%
Stockton	10	7	70%	14%	100%
Middlesbrough	11	8	73%	0%	89%
Redcar & Cleveland	11	11	100%	0%	86%

FINANCE AND POLICY COMMITTEE

18TH SEPTEMBER 2023



Subject: CORPORATE PROCUREMENT QUARTERLY REPORT ON CONTRACTS

Report of: Executive Director of Development, Neighbourhoods and Regulatory Services

Decision Type: Non Key Decision

1. COUNCIL PLAN PRIORITY

Hartlepool will be a place:
- where people are enabled to live healthy, independent and prosperous lives.
- where those who are vulnerable will be safe and protected from harm.
- of resilient and resourceful communities with opportunities for all.
- that is sustainable, clean, safe and green.
- that has an inclusive and growing economy.
- with a Council that is ambitious, fit for purpose and reflects the diversity of its community.

2. PURPOSE OF REPORT

2.1 To satisfy the requirements of the Council's Contract Procedure Rules with regard to the Finance and Policy Committee:

- Receiving and examining quarterly reports on the outcome of contract letting procedures including those where the lowest/highest price is not payable/receivable.
- Receiving and examining reports on any exemptions granted in respect of the Council's Contract Procedure Rules.

3. BACKGROUND

- 3.1 The Council's Contract Procedure Rules require that the following information be presented to the Finance and Policy Committee on a quarterly basis:

Section of Contract Procedure Rules		Information to be reported
Introduction	Para 8 iii & Para 8 vi	Outcome of contract letting procedures
Part G	Para 12 v	
Introduction Part B	Para 8 iii Para 3 v	Basis of award decision if not lowest/highest price payable/receivable
Introduction	Para 8 vi	Contract Name and Reference Number
Part G	Para 12 v	
Introduction	Para 8 vi	Description of Goods/Services being procured
Part G	Para 12 v	
Introduction	Para 8 vi	Department/Service area procuring the goods/services
Part G	Para 12 v	
Introduction	Para 8 vi	Prices (separate to Bidders details to preserve commercial confidentiality)
Part G	Para 12 v	
Part G	Para 12 v	Details of Bidders

- 3.2 In addition to tender related information, details of exemptions granted to the Contract Procedure Rules are also reportable quarterly.

4. INFORMATION FOR REVIEW

4.1 Tender information

Appendix A details the required information for each procurement tender awarded since the last quarterly report along with the social value percentage weighting that was incorporated at the application stage.

4.2 Exemption information

Appendix B provides details of the required information in relation to Contract Procedure Rules exemptions granted since the last Corporate Procurement Quarterly Report on Contracts. Exemption request forms have been amended to detail reasons why Hartlepool based firms have not been selected and this information is now being collated.

4.3 Commercial / Confidential information

Appendix C includes the commercial information in respect of the tenders received and any confidential information relating to Contract Procedure Rule exemptions or contract extensions.

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, Appendix C.

5. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	No relevant issues.
FINANCIAL CONSIDERATIONS	No relevant issues.
LEGAL CONSIDERATIONS	No relevant issues.
CHILD AND FAMILY POVERTY	No relevant issues.
EQUALITY AND DIVERSITY CONSIDERATIONS	No relevant issues.
STAFF CONSIDERATIONS	No relevant issues.
ASSET MANAGEMENT CONSIDERATIONS	No relevant issues.

ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No relevant issues.
CONSULTATION	N/A

6. RECOMMENDATIONS

- 6.1 That the Committee note and comment on the contents of the report.

7. REASONS FOR RECOMMENDATIONS

- 7.1 The Committee is required to review the information supplied to ensure that monitoring in the award of contracts is carried out and evidenced.

8. BACKGROUND PAPERS

- 8.1 There are no background papers.

9. CONTACT OFFICERS

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Sign Off:-

Managing Director	Date: 05/09/2023
Director of Finance, IT and Digital	Date: 05/09/2023
Director of Legal, Governance and HR	Date: 05/09/2023

APPENDIX A – TENDER INFORMATION (details the required information for each procurement tender awarded since the last quarterly report along with the social value percentage weighting that was incorporated at the application stage)

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
11.8.2022	Passenger Transport Services – Officer Transportation & Safe-Guarding – DN 611451	The service is for Officer Transportation and safeguarding, assessment & support services predominantly the journeys will be within Hartlepool.	36 Months	Neighbourhoods & Regulatory Services	Open Invitation	23 Taxis Limited, Hartlepool Blueline Taxis Limited, Newcastle-upon-Tyne	100% Price	23 Taxis Limited, Hartlepool	23 Taxis Limited, Hartlepool
22.8.2022	Domestic Abuse Support Services for Adults, Children and Young People – DN 612609	The service is designed to provide domestic abuse support services and a children's therapeutic service. Lot 1 – Domestic Abuse Support Services Lot 2 – Domestic Abuse Children's Therapeutic Service	36 Months plus 2 x 12 month extension	Children's & Joint Commissioning – on behalf of Public Health	Open Invitation	Harbour Support Services, Hartlepool Barnados, Essex Children North East, Newcastle	90% Quality 10% Price (10% Social Value included as part of the Quality Assessment)	Harbour Support Services, Hartlepool Harbour Support Services, Hartlepool	Harbour Support Services, Hartlepool N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
						Harbour Support Services, Hartlepool			
26.08.2022	Passenger Transport Services – After School Services – DN 622242	The service is for an after school provision where predominantly the journeys will be within Hartlepool.	36 Months	Neighbourhoods & Regulatory Services	Open Invitation	23 Taxis Limited, Hartlepool	100% Price	23 Taxis Limited, Hartlepool	23 Taxis Limited, Hartlepool
22.11.2022	Assistive Technological Solution – DN 616974	The service is to provide assistive technological solutions to support people to maintain their independence in the community and contribute to the prevention of admissions to hospital and into long term residential and nursing care.	72 month plus an optional 48 month extension	Children's & Joint Commissioning – Adults Commissioning	Open Invitation	Medequip Assistive Technology Limited, Harmondsworth PPP Taking Care Limited, Devon	100% Quality (10% Social Value included as part of the Quality Assessment)	PPP Taking Care Limited, Devon	Thirteen, Middlesbrough

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
1.12.2022	Wynyard Road Local Safety Scheme – DN 637232	The 6 companies on HBC Select List of Contractors for Highways were invited to submit a price for the provision of the installation of a pedestrian crossing.	3 months	Neighbour hoods & Regulatory Services	BAM Ritchies, Glasgow ESH Construction Ltd, Bowburn Durham Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham Seymour Civil Engineering Contractors Ltd, Hartlepool	Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham Seymour Civil Engineering Contractors Ltd, Hartlepool	100% Price	Highway Construction Services, Stockton	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
15.12.2022	2 (two) Domestic Refuse Collection Vehicles for use in back streets and alleys – DN 641108	28 companies on the NEPO/TPPL HGV & Specialist Vehicles Procurement Framework – Lot 2 Vehicle Conversions up to 44 tonne were invited to submit a price for a 32 Tonne Hookloader Vehicle	-	Neighbourhoods & Regulatory Services	28 providers	Farid Hillend Engineering Limited, Dumfermline NTM – GB Limited, Worcestershire	50% Price 50% Quality	Farid Hillend Engineering Limited, Dumfermline	N/A
16.12.2022	Brenda Road Business Corridor Improvements – DN 636080	The 6 companies on HBC Select List of Contractors for Highways were invited to submit a price for the provision of the installation of street lighting infrastructure and footway improvements	3 months	Neighbourhoods & Regulatory Services	BAM Ritchies, Glasgow ESH Construction Ltd, Bowburn Durham Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham	ESH Construction Ltd, Bowburn Durham Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham Seymour Civil Engineering	100% Price	Highway Construction Services, Stockton	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
					Seymour Civil Engineering Contractors Ltd, Hartlepool	Contractors Ltd, Hartlepool			
27.1.2023	Golden Flatts Access Road – DN 644726	The 6 companies on HBC Select List of Contractors for Highways were invited to submit a price for the installation of new access road, footpath and street lighting and all associated works	3 months	Neighbour hoods & Regulatory Services	BAM Ritchies, Glasgow ESH Construction Ltd, Bowburn Durham Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham Seymour Civil Engineering	Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham Seymour Civil Engineering Contractors Ltd, Hartlepool	100% Price	Seymour Civil Engineering Contractors Ltd, Hartlepool	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
					Contractors Ltd, Hartlepool				
24.2.2023	Provision of a Stroke Recovery Service – DN 652334	The overall aim of the Stroke Recovery Service is to provide and coordinate the longer-term personalised support that people affected by stroke need to rebuild their lives after stroke, live full lives in their communities and prevent further stroke.	36 Months plus 2 x 12 month extension	Children's & Joint Commissioning – Adults Commissioning	Open Invitation	Stroke Association, Nottingham	100% Quality	Stroke Association, Nottingham	Stroke Association, Nottingham
24.2.2023	Sexual Health Prevention Services – C-Card, Education & Training - DN 648899	The provision of a preventative sexual health offer across Hartlepool, including the provision of C-Card services, targeted outreach to those communities at most risk of poor sexual health.	24 months	Children's & Joint Commissioning – on behalf of Public Health	Open Invitation	Brook, Cornwall	70% Quality 30% Price (10% Social Value included as part of the Quality Assessment)	Brook, Cornwall	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
4.4.2023	Yacht Club Ramp Works – DN 660893	The 6 companies on HBC Select List of Contractors for Highways were invited to submit a price for work on the Yacht Club Ramp.	3 Months	Neighbourhoods & Regulatory Services	BAM Ritchies, Glasgow ESH Construction Ltd, Bowburn Durham Hall Construction Services Ltd, Rushyford, Durham Highway Construction Services, Stockton Rainton Construction Services Ltd Durham Seymour Civil Engineering Contractors Ltd, Hartlepool	Hall Construction Services Ltd, Rushyford, Durham Rainton Construction Services Ltd Durham Seymour Civil Engineering Contractors Ltd, Hartlepool	100% Price	Seymour Civil Engineering Contractors Ltd, Hartlepool	N/A
13.4.2023	The Provision of Extra Care Services – DN 655654	The provision of extra care services to enable older people to improve or maintain their independence for as long as possible Extra care in Hartlepool includes access to on	60 Months Plus an option to extend for 12 month periods until 2023	Children's & Joint Commissioning – Adults Commissioning	Open Tender	Agincare Group Limited, Dorset Care Supreme, London Dale Care Limited, Durham	70% Quality 30% Price (10% Social Value included as part of the Quality Assessment)	Dale Care Limited, Durham	Dale Care Limited, Durham

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
		site care and support services 24/7, 365 days per year to help to maintain independence.				Extra Care Limited, Essex Hales Group Limited, Cambridgeshire The Human Support Group, Nottingham Universal Healthy Minds Limited,			
14.4.2023	The provision of 1 Hookloader Vehicle – DN 656201	28 companies on the NEPO HGV & Specialist Vehicles Procurement Framework – Lot 2 Vehicle Conversions up to 44 tonne were invited to submit a price for a 32 Tonne Hookloader Vehicle	N/A	Neighbourhoods & Regulatory Services	28 providers	Bell Truck & Van, Tyne & Wear North East Truck & Van Limited, Billingham Thompson Commercials Limited, Hull Volvo North & Scotland Limited, Glasgow	50% Quality 50% Price	Volvo North & Scotland Limited, Glasgow	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
3.5.2023	The Provision of a Carers Support Service – DN 659839	The provision of a service available to all carers who provide care and support to a parent, grandparent, sibling or close relative who are ordinarily resident in the borough of Hartlepool.	60 Months	Children's & Joint Commissioning – Adults Commissioning	Open Tender	<p>Angy Care Limited, Kent</p> <p>Hartlepool Carers, Hartlepool</p> <p>Infinity Caring Solutions, West Midlands</p> <p>Julee Care Limited, Herefordshire</p> <p>Pluto BV Services Limited, Northamptonshire</p> <p>QH Care Services, Surrey</p>	100% Quality (10% Social Value included as part of the Quality Assessment)	Hartlepool Carers, Hartlepool	Hartlepool Carers, Hartlepool
11.5.2023	Park and Ride Scheme – Tall Ships 2023 – DN 663397	The provision of a park and ride services for the Tall Ships Event	July 2023	Neighbourhoods & Regulatory Services	Open Tender	<p>Frontline Mini Bus, Markse-by-the-Sea</p> <p>Garnetts Coaches Limited, Bishop Auckland</p> <p>Go North East, Gateshead</p>	100% Price	Go North East, Gateshead	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
12.6.2023	Exploitation Service for Children & Young People – DN 668127	The provision of a service who will engage with a range of young people who may be at risk of or involved in child sexual exploitation or child criminal exploitation.	60 Month	Children's & Joint Commissioning – Adults Commissioning	Open Tender	Barnardos, Essex The Children's Society, London	100% Quality	The Children's Society, London	Barnados, Essex
19.6.2023	Stranton Crematorium Refurbishment – DN 656913	The refurbishment of Stranton Crematorium	2023	Neighbourhoods & Regulatory Services	Historic Property Restoration Limited, Tyne & Wear MGM, Gateshead Stone Technical Services, County Durham St Astiers Limited, Durham	Historic Property Restoration Limited, Tyne & Wear Stone Technical Services, County Durham	100% Price	Historic Property Restoration Limited, Tyne & Wear	N/A
18.7.2023	Waverley Terrace Allotments - Drainage and improvement works – DN 671753	Drainage improvement works for Waverley Terrace allotments		Neighbourhoods & Regulatory Services	Brambledown Landscape Services Limited, Durham Dawson Landscapes Limited, Hartlepool Deerness Fencing & Landscaping Limited, Durham	Dawson Landscapes Limited, Hartlepool	100% Price	Dawson Landscapes Limited, Hartlepool	N/A

Date of Contract Award	Contract Name and Reference Number	Description of Goods / Services being procured	Duration of Contract (optional extensions in brackets)	Department / Service area procuring the goods / services	Details of Companies invited including location	Details of Bids received	Basis of award decision if not lowest/highest price payable / receivable	Outcome of contract letting procedures	Previous Provider / Location
28.7.2023	12 No. Medium Sized Panel Vans – DN674088	25 companies on the NEPO /TPPL Framework - EXT113 Vehicle Purchase - Cars, LCVS, MCV'S up to 12500 GVW, Plant and Equipment	-	Neighbourhoods & Regulatory Services	25 Providers	Motus Group Limited, Derbyshire Sherwoods, Stockton-on-Tees	50% Quality 50% Price	Motus Group Limited, Derbyshire	N/A
28.7.2023	5 No. Panel Vans – DN674004	25 companies on the NEPO /TPPL Framework - EXT113 Vehicle Purchase - Cars, LCVS, MCV'S up to 12500 GVW, Plant and Equipment	-	Neighbourhoods & Regulatory Services	25 Providers	Motus Group Limited, Derbyshire Sherwoods, Stockton-on-Tees	50% Quality 50% Price	Motus Group Limited, Derbyshire	N/A
28.7.2023	The provision of services to support individuals where hoarding impacts on wellbeing and self-neglect – DN 676206	The provision of services to support individuals where hoarding impacts on wellbeing and self-neglect – DN676206	36 Month	Children's & Joint Commissioning – on behalf of Public Health	A&M Solutions (UK) Limited, Redcar The Big League CIC, Hartlepool Lets Connect (ENG) Limited, Hartlepool	Lets Connect (ENG) Limited, Hartlepool	100% Quality (10% Social Value included as part of the Quality Assessment)	Lets Connect (ENG) Limited, Hartlepool	N/A

Appendix B - Procurements Exempted from Council Contract Procedure Rules

(provides details of the required information in relation to Contract Procedure Rules exemptions granted since the last Corporate Procurement Quarterly Report on Contracts. Exemption request forms have been amended to detail reasons why Hartlepool based firms have not been selected and this information is now being collated)

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Neighbourhoods & Regulatory Services	Planning & Development	Glenkemp Limited	Gateshead	16.9.2022 – 17.9.2023	The Authority is looking to engage a Landscape Consultancy to act as an expert witness in respect to a Planning Appeal relating to Solar Farm infrastructure which is linked to an appeal for a solar farm in Durham.	Request Approved by Chris Little, Tony Hanson and Hayley Martin -22.9.2022
Adult & Community Based Services	Heritage and Open Spaces	C Bannister Engineering Services Ltd	London	1.11.2022 – 31.4.2023	The PS Wingfield Castle is a historic paddle steamer located in the Hartlepool Marina and forms part of the museum collection for Hartlepool Borough Council and as an exhibition piece for the National Museum of the Royal Navy (NMRN). The ship is owned and maintained by Hartlepool Borough Council. As such, HBC now requires a scheme of emergency works to be carried out to safeguard the vessel as there is significant risk of sinkage if left to sit through another winter.	Request Approved by Chris Little, Jill Harrison, and Neil Wilson - 26.10.2022
Adult & Community Based Services	Community and Preventative Based Services	Just Heat – Hartlepool Meals on Wheels (also trading as Billie May's Bistro)	Hartlepool	One Off Procurement	The Support Hub continues to support people in the town who are older, vulnerable, living in poverty and isolation. Just Heat would deliver to everyone on the list between midday and mid-afternoon on Christmas Day. This would mean that not only would everyone receive a freshly cooked meal, they would also would see a friendly face.	Request Approved by Chris Little, Jill Harrison, and Hayley Martin - 22.11.2022
Adult & Community Based Services	Community Based Services	Richmond Event Management	Bristol	One Off Procurement	The contract is for the delivery of bespoke event management delivery of the Council's Fireworks and Music event on Friday 4 th November.	Request Approved by Chris Little, Jill Harrison, and Hayley Martin - 19.10.2022
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Solent Rib Charter	Lymington	One Off Procurement	A specialist service required specifically for Tall Ships Hartlepool 2023. Solent Rib Charter provide a specialist "Push Me" service for Tall Ships. They have worked successfully at many Tall Ships events including Hartlepool in 2010. The Harbour Master, Deputy Harbour Master, Ops Manager at PD Ports and Directors at Hartlepool Marina	Request Approved by Chris Little, Jill Harrison, and Hayley Martin - 30.11.2022

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					are all strongly advocating for this company to be used as they are the most experienced in this very niche service.	
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	John Nixon Ltd (T/A Nixon Hire)	Newcastle	One Off Procurement	HBC advertised a contract for toilets twice and had no bids from any companies. There is a supply chain issue for event toilets which has been ongoing since 2020. We went direct to Nixon's and they are able to supply the chemical toilets and wheelchair accessible toilets only, they cannot commit to providing the showers we require for the crew due to supply chain issues.	Request Approved by Chris Little, Jill Harrison, and Hayley Martin - 2.11.2022
Neighbourhoods & Regulatory Services	Building Design Consultancy	Tees Insulation Services Limited	Hartlepool	One Off Procurement	The Asbestos removal work required in the property is licensed works and needs notification to the HSE. Tees can accommodate this request allowing them to carry out the actual removal at the beginning of January to allow the Construction Team to start their works in February.	Request Approved by Chris Little, Tony Hanson, and Hayley Martin - 6.12.2022
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Richmond Event Management	Bristol	1.12.2022 – 31.7.2023	HBC advertised for a Commercial Manager and received no applications, we looked at internal resource and were unable to identify the skill set and availability to take on this task. REM have the necessary experience to fulfil this role.	Request Approved by Chris Little, Denise McGuckin and Hayley Martin - 15.12.2022
Adult & Community Based Services	Heritage and Open Places	Gray's Ecology	Saltburn-by-the Sea	2.9.2022 – 31.1.2023	There is a need for the authority to have ecological advice available when it is discharging it's planning function and carrying out works. The ecologist is leaving the authority on 11 th March to move to another local authority. In light of the four week notice period, and the time it takes to recruit, it is proposed that as an interim freelance advice is sought in order to support the planning process	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 17.1.2023
Adult & Community Based Services	Heritage and Open Places	Nature Based Solutions Ltd	Darlington	1.2.2023 – 31.7.2023	There is a need for the authority to have ecological advice available when it is discharging it's planning function and carrying out works. The ecologist left the authority on 11 th March 2022 to move to another local authority. Since that time an attempt has been made to recruit an ecologist but no suitable candidates have come forward. Until the recruitment can be completed it is proposed that advice will be drawn from other sources.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 18.1.2023
Neighbourhoods & Regulatory Services	Building Design Consultancy	Cleveland Sitesafe Limited	Middlesbrough	1.1.2023 – 30.6.2023	The replacement of the Seaton Carew clock tower toilets is currently being progressed following a feasibility study	Request Approved by Chris Little, Hayley Martin and

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					in 2022 that identified that the preferred option would be to provide new facilities. An exemption is therefore sought to secure the manufacture and supply of these toilet units on the basis of a specification that is currently only available through a single supplier.	Tony Hanson – 19.1.2023
Children's and Joint Commissioning	Joint Commissioning	Togetherall	London	1.2.2023 – 31.1.2024	There is increasing need for emotional health and wellbeing support for adults across Hartlepool. This has increased since COVID and health services are struggling to cope. We are proposing to fund a one year pilot of "Togtherall" to see if this meets the needs of our Hartlepool community to inform future planning.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 24.1.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Greentree Mobile Showers UK Ltd	London	4.7.2023 – 10.7.2023	HBC advertised a contract for toilets and showers twice and had no bids from any companies. There is a supply chain issue for event toilets and showers which has been ongoing since 2020. We went direct to Nixons who are a registered supplier of HBC and asked them to quote, they are able to supply the chemical toilets and wheelchair accessible toilets only, and they could not supply showers.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 27.1.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Off The Beaten Track Music	Darlington	1.10.2022 – 17.7.2023	The contract is for the delivery of the creative music programme for Tall Ships 2023, as the cornerstone of the customer/public facing entertainment programme of the event, which runs over 4 days in July 2023.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 27.1.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	TPA Portable Roadways	Harrogate	3.7.2023 – 10.7.2023	The contract is for portable trackway for the Tall Ships site from Navigation Point to the North Basin in PD Ports.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 1.2.2023
Resources & Development	Economic Development	Blue Sail Consulting Limited	Brighton	7.2.2023 – 31.3.2023	As part of the Hartlepool Waterfront Regeneration Project, it was identified that a Destination Management Plan (DMP) would be needed to support the development, management and promotion of Hartlepool Waterfront into a quality visitor destination. It was identified that the additional work to incorporate a wider Hartlepool perspective would support to better inform the Waterfront DMP and also provide us with a wider strategic framework. Blue Sail are best placed to	Request Approved by Chris Little, Hayley Martin and Denise McGuckin – 7.2.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					undertake this additional piece of work whilst offering value for money as they are already delivering the work on the Waterfront DMP.	
Children's and Joint Commissioning	Joint Commissioning	Incontrol-able CIC	Hartlepool	16.01.2023 – 20.02.2023	<p>All councils with Adult Social Services Responsibilities in England are required to conduct the Personal Social Services: Adult Social Care Survey England which is an annual postal survey of those to whom they provide services.</p> <p>The UK Public Procurement Regulations 2015 20(1) allows for the reservation of contracts where at least 30% of the employees of those workshops, economic operators or programmes are disabled or disadvantaged workers.</p> <p>In accordance with the above Regulations, as more than 30% of the employees of Incontrol-able CIC are registered as living with a disability, it is proposed that the organisation be invited to contract to commence 16 January 2023 to support people with a learning disability to complete the Personal Social Services: Adult Social Care Survey England.</p>	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 23.3.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Stambridge Group – Security	Southend-on-Sea	19.6.23 - 16.7.23	<p>After an unsuccessful procurement exercise HBC approached Stambridge Group direct for a quote for event security for the Tall Ships Event, they have passed both the financial and health and safety checks. We are therefore seeking an exemption for a direct award. Final draft safety documents are required to be submitted by 11th May for a multiagency table top exercise and final submissions signed off by SAG W/C 22nd May therefore there is no time to progress with another tender exercise and a direct award managed risk of event failure and further financial pressure which is being incurred because of the lead in time to the event.</p>	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 7.3.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	The Travel Lodge	Hartlepool	29.6.2023 – 11.7.2024	<p>We have contractual obligations to provide accommodation for both external contractors and performers. The duration of the stay varies dependent upon their contractual obligations and needs of the event. There is limited accommodation within Hartlepool and this is the cheapest accommodation close to the event</p>	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 10.3.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Children's & Joint Commissioning Services	Youth Justice Service	ABC	Billingham	1.3.2023 – 31.3.2024	The Youth Justice Service received funding from the MOJ to deliver the Turnaround Programme. The actual timeframe from receiving the funding to having the programme up and running is very tight. As per the programme criteria there is a need to offer all families/children entering the programme a therapeutic evidence based intervention. We have searched locally/regionally for the best fit alongside costings and ABC (Billingham) met the requirements, the local authority and the YJS have used their services in the past and are happy to do so again for the duration of the Turnaround Programme. ABC will provide a qualified/experienced family/child therapist with additional/specialised skill sets.	Request Approved by Chris Little, Hayley Martin and Sally Robinson – 16.3.2023
Children's & Joint Commissioning Services	Youth Justice Service	CFNE – Changing Futures North East	Hartlepool	1/3/23 – 31/3/24	The Youth Justice Service received funding from the MOJ to deliver the Turnaround Programme. The actual timeframe from receiving the funding to having the programme up and running is very tight. As per the programme criteria there is a need to offer all families/children entering the programme a therapeutic evidence based intervention. We have searched locally/regionally for the best fit alongside costings and CFNE (Hartlepool) met the requirements, the local authority and the YJS have used their services in the past and are happy to do so again for the duration of the Turnaround Programme. CFNE will provide a qualified/experienced family/child therapist with additional/specialised skill sets	Request Approved by Chris Little, Hayley Martin and Sally Robinson – 16.3.2023
Adult & Community Based Services	Community Based Services	4Global	Chiswick	20/3/23 – 31/1/24	HBC has been asked to become a national pilot project linked to the development and roll out of Moving Communities Place – a data collection and insight management approach which seeks to understand and develop knowledge, data and insight regarding people's levels of activity. MC Place also connects with a range of wider social outcome agendas, giving us a greater understanding of the connections between mental and physical wellbeing, demographics, geographical location etc and physical activity/inactivity. Sport England had pre-determined the contractor – 4Global.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 21.3.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Children's & Joint Commissioning Services	Joint Commissioning	University Hospitals Birmingham NHS Foundation Trust	Birmingham	1.2.2023-31.1.2024	Hartlepool has been successful in gaining Family Hubs funding (DfE). The programme has a number of strands with one of them being parenting support, DfE will only passport the funding if specific programmes are used. Health visitors have previously been trained in this approach and therefore this approach is felt to be the most appropriate to improve outcomes for our children. The Solihull Approach will provide online parenting intervention to parents in Hartlepool and to undertake staff training to include group facilitator training.	Request Approved by Chris Little, Hayley Martin and Sally Robinson – 21.3.2023
Neighbourhoods & Regulatory Services	Construction - Engineering, Design and Management	Matt Taylor & Partners	Stockton	May 2023	Matt and his company have expertise in Autocad Civils 3D and in highway design. They would be used to supplement the EDM's work load and to assist when they are past full capacity.	Request Approved by Chris Little, Hayley Martin and Tony Hanson – 5.4.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	NEAS – North East Ambulance Service	Billingham	1.7.2023 – 16.7.2023	A specification was developed for the procurement of medical services for the safe delivery of Tall Ships Hartlepool 2023. Five submissions were received (NEAS included in the submissions) however throughout the procurement process it became apparent from SAG and Manchester enquiry that there was a key element of event command and control that needed to be embedded into the requirements of the medical specification. The command and control can only be effectively provided by NEAS as a statutory body due to their communication channels into the NHS. They promoted this in their tender as this is standard practice for them to provide a clear command and control structure for events of scale. Due to the change in specification that was only apparent after the original spec was submitted it was agreed to end the procurement process. It is proposed that a direct award is made to NEAS with amendments to the requirements to ensure the key recommendations from the Manchester enquiry, access to adequate staff and assets (including command and control) and appointment of a contractor with experience of events of scale is achievable.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 17.4.2023
Children's & Joint	Joint Commissioning Services	NHS North of England Commissioning	Durham	1.4.2023 (6 months)	Hartlepool has been successful in gaining Family Hubs funding (DfE). There is a requirement that the local area	Request Approved by Chris Little, Hayley Martin and

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Commissioning Services		Unit (NHS England)			undertakes a needs assessment for children and families with a particular focus on 0-5 years old. We advertised this piece of work to commission a provider to undertake this work however there was no-one suitable identified (there was only one bid and the provider did not fulfil the requirements set out in the tender information). In order to ensure that we meet the requirements of the Family Hubs programme we approached health colleagues at NECS (North of England Commissioning Support)	Sally Robinson – 20.04.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Premier Inn	Hartlepool	2.7.2023 – 11.7.2023	We have contractual obligations to provide accommodation for both external contractors and performers. The duration of the stay varies dependent upon their contractual obligations and needs of the event: Accommodation close to the event site is required for safety, security and operational reasons. This accommodation is not only needed for contractors and performers but for Sail Training International Staff as per our contract. There is limited accommodation within Hartlepool	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 20.4.2023
Neighbourhoods & Regulatory Services	Community Safety Team	North SV Limited	Newcastle	One Off Procurement	The Community Safety Team is responsible for the operation and management of the Council's public space CCTV Service. The CCTV Service is operated using the towns CCTV Control Room and its associated CCTV cameras, CCTV control systems, software, hardware, and equipment. In order for this CCTV Service to be able to operate it requires a CCTV maintenance contractor to be employed by the Council to provide regular planned and reactive CCTV maintenance, repairs, replacement, and software/equipment updates and installations. Given the inability of the current CCTV maintenance contractor to undertake work requested by the Council a procurement exemption is requested so that North SV Ltd can be hired.	Request Approved by Chris Little, Hayley Martin and Tony Hanson – 28.4.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Richmond Event Management Limited	Bristol	1.5.2023 – 30.6.2023	REM have been procured to provide specialist site management and event spectator safety management for the planning and delivery of Tall Ships 2023. This high profile international event requires very specialist	Request Approved by Chris Little, Hayley Martin and

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					<p>technical knowledge, skills and experience relating to a variety of tall ships and a festival site close to deep water. REM have extensive experience in high risk international events including every Tall Ship Race event in the UK since 2003 and have an exceptional reputation within the maritime event industry. REM were used by Hartlepool Borough Council for the Tall Ships in 2010 and delivered to a very high standard.</p> <p>A range of site management services are required to enable the event to operate safely, including security and production services, fencing and marquees. Despite repeated procurement exercises the Council has been unable to secure these services due to limited supplier availability which was resulting in inflated prices. The Council's obligation to REM is to provide them with the services required to safely deliver site management of the event. Inability to source these services creates risk of cancellation with associated reputational damage and loss of income.</p> <p>REM, as event specialists running events of scale several times a year, have significant national contacts willing to negotiate and engage with them due to trust, relationships and the opportunity of future work. REM have therefore offered to advocate on behalf of HBC to secure the essential services within the allocated budget. REM will provide a detailed breakdown to the Council to evidence the services secured, who will be the supplier and the associated cost. To avoid financial risk to REM, the Council will ensure that payment is made as soon as possible on receipt of invoices.</p>	Jill Harrison – 17.5.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Fendercare Limited	Norfolk	4.7.2023 – 7.7.2023	<p>There is a requirement for additional fendering within Victoria Dock, to mitigate against damage or loss to a Tall Ship whilst alongside at different states of the tide. The current fixed commercial fendering which is installed is not suitable to provide sufficient protection. Fendercare have provided fendering for previous Tall Ships events so understand the requirements of the vessels. We are also not aware of a fender supplier who</p>	Request Approved by James Magog, Hayley Martin and Jill Harrison – 23.5.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					can provide the same level of resource and service within the timescales provided.	
Adult & Community Services	Community Based Services (Tall Ships 2023)	Ramside Catering Limited	Durham	3.7.2023 – 10.7.2023	<p>An event caterer is required to provide a number of lots for the Tall Ships Races 2023, this requires an on-site kitchen to be built and a number of vehicles to accommodate the logistics of transporting food from the kitchen to the designated venue across the event/ Lots include:</p> <ol style="list-style-type: none"> 1. Captains Dinner 2. Crew Party 3. Ship Hospitality x 4 days 4. Workforce break area x 7 days 0700-2100 5. Volunteer catering 5 days 	Request Approved by James Magog, Hayley Martin and Jill Harrison – 23.5.2023
Children's & Joint Commissioning Services	Joint Commissioning Services (on behalf of Public Health)	Caja Limited	Staffordshire	1.6.2023 – 30.9.2023	<p>Public Health leads from County Durham, Hartlepool, Northumberland and Redcar and Cleveland, have been in discussion regarding a collaborative approach to increasing adolescent vaccine uptake. Middlesbrough have recently undertaken a procurement exercise to appoint an organisation who specialise in research and behavioural sciences, to undertake a project to increase vaccine uptake. The contract was awarded to Caja, who use their own patented Discover, Design and Deliver methodology. The project in Middlesbrough has begun, and initial feedback is positive.</p> <p>Caja can extend their work to the other local authorities, splitting the cost between authorities and using the insights from the Middlesbrough project to inform their work, including the introduction of research based interventions, generating an initial cost saving.</p>	Request Approved by James Magog, Hayley Martin and Sally Robinson – 24.5.2023
Children's & Joint Commissioning Services	Joint Commissioning Services (on behalf of Public Health)	Caja Limited	Staffordshire	1.6.2023 – 31.7.2023	<p>Public Health leads from County Durham, Hartlepool, Northumberland and Redcar and Cleveland, have been in discussion regarding a collaborative approach to increasing adolescent vaccine uptake. It is therefore essential to improve these vaccination uptake and pace in order to protect the adolescent population as soon as possible.</p> <p>Middlesbrough have recently undertaken a procurement exercise to appoint an organisation who specialise in</p>	Request Approved by James Magog, Hayley Martin and Sally Robinson – 24.5.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					research and behavioural sciences, to undertake a project to increase vaccine uptake. The contract was awarded to Caja, who use their own patented Discover, Design and Deliver methodology. The project in Middlesbrough has begun, and initial feedback is positive. Caja can extend their work to the other local authorities, splitting the cost between authorities and using the insights from the Middlesbrough project to inform their work, including the introduction of research based interventions, generating an initial cost saving	
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	PD Ports and The Marine Group Cardiff via Hartlepool Marina Limited	Hartlepool	22.5.2023 – 2.6.2023	<p>The Harbour Master, Deputy Harbour Master, Ops Manager at PD Ports and Directors at Hartlepool Marina are all in agreement that the Water Injection process is the most cost effective and will have the least impact on the environment.</p> <p>The Marine Group are the only company Andrew Ridley could find that have the correct size vessel and equipment to complete this job, the water is shallow and the entry point to the channel is narrow, we need a small vessel with shallow draft to do this.</p> <p>PD Ports are one of two companies that have a suitable plough, the other company (UK Dredging) will charge us to deliver the plough, to mobilise and demobilise it, and return it to its base. They will also charge Port fees and they charge if the work is cancelled due to bad weather. PD Ports will not charge for any of this</p>	Request Approved by James Magog, Hayley Martin and Jill Harrison Robinson – 25.5.2023
Adult & Community Based Services	Community Based Services	This is Focus	Bristol	1.6.2023-29.9.2023	<p>There is a requirement to update the content of Hartlepool Now integrating the services that include:</p> <ul style="list-style-type: none"> Careers guidance, Employment support and access to courses and learning – including online enrolments <p>The Authority has a long and well established relationship with This is Focus and have collaborated on a number of developments over the years. This is Focus understand our approach and are open and willing to work with us to develop and deliver innovative solutions. In addition, they remain the providers of Hartlepool Now, the platform on</p>	Request Approved by James Magog, Hayley Martin and Jill Harrison – 25.5.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					which we want our new system to be intrinsically linked to and connected with.	
Neighbourhoods and Regulatory Services	Highway Infrastructure Section	Professional Security UK Limited	Leeds	19.6.2023 – 14.7.2023	Operational requirement for professional stewards to operate the car Tall Ships car parks solely during event window of 6-9 July.	Request Approved by James Magog, Hayley Martin and Tony Hanson – 26.5.2023
Children's & Joint Commissioning Services	Children's & Families	Changing Futures North East	Hartlepool	1.7.2023 – 31.4.2024	HBC has successfully obtained a DFE grant for the delivery of Family Group Conferences. The conferences must be delivered from July 2023 to March 2024. A Family Group Conference is a process led by family members to plan and make decisions for a child who is at risk. Families are assisted by an independent Family Group Conference Co-ordinator to prepare for the meeting. Changing Futures has a well-established Family Group Conferencing service that is able to undertake this work within the timescales defined by the DFE. We are assured of their ability to effectively engage with a range of families, ensuring that the programme is a success.	Request Approved by James Magog, Hayley Martin and Sally Robinson – 6.6.2023
Children's & Joint Commissioning Services	Education Services	Youth Sports Trust	Leicester	1.9.2023 – 31.7.2023	Youth Sport Trust presented the Healthy Movers specialist project work that they had been doing in partnership with Cornwall, West Somerset, Dorset, Bournemouth, Christchurch and Poole LAs at a Department for Education national event. The Healthy Movers project aims to improve the physical literacy skills of young children.	Request Approved by James Magog, Hayley Martin and Sally Robinson – 9.6.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Promotional Warehouse Limited	Glasgow	1.6.2023 – 30.9.2023	Merchandise supplier for the Tall Ships 2023 Event. Promotional Warehouse will pay: £7500 for the rights to sell merchandise at the Tall Ships Event. HBC will get 20% of income from all merchandise sales	Request Approved by James Magog, Hayley Martin and Jill Harrison – 11.6.2023
Adult & Community Based Services	Community Based Services (Tall Ships 2023)	Promotional Warehouse Limited	Glasgow	1.6.2023 – 30.9.2023	Uniform supplier for staff and volunteers for the Tall Ships 2023 event.	Request Approved by James Magog, Hayley Martin and Jill Harrison – 11.6.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Neighbourhoods & Regulatory Services	Planning & Development Building Control	S&P Global (HIS)	London	28.4.2023 – 28.4.2024	The provision of specialist building regulation documents.	Request Approved by James Magog, Hayley Martin and Tony Hanson – 19.6.2023
Children's & Joint Commissioning Services	Joint Commissioning	In-Control	London	11.7.2023 – 8.9.2023	It has been proposed that In-Control deliver a one-off programme for people with additional needs over the summer period, with an additional session to include graduation and mentoring for 2 of the team so we can then deliver the programme in house. In-Control are a specialised company who have worked with HBC before and would provide training so that this programme would be delivered in-house in the future.	Request Approved by James Magog, Hayley Martin and Jill Harrison – 3.7.2023
Adult & Community Based Services	Safeguarding & Specialist Services	Astor Bannerman	Cheltenham	One Off Procurement	The Council has been awarded a grant of £100,000 by DHLUC to provide four additional Changing Place Toilets within Hartlepool. The facilities must meet national specifications and design criteria and will be provided at Seaton Carew, Headland, Summerhill and Central Hub. Astor Bannerman have worked with Cleveland Site Safe to deliver the scheme at Seaton Carew, and it was recommended by the Project Group that the same partnership (involving a local provider alongside the specialist provider) be utilised to deliver the remaining schemes. Astor Bannerman have the skills, competence, knowledge and expertise required to meet the specific design criteria required	Request Approved by James Magog, Hayley Martin and Jill Harrison – 4.7.2023
Children's & Joint Commissioning Services	Joint Commissioning	Changing Futures North East	Hartlepool	One Off Procurement	There is a requirement within Family Hub Services to support Fathers Inclusive Practice. We are requesting this exemption as CFNE are a local organisation who are already supporting our Family Hubs through the services they deliver to families in Hartlepool and are the only local provider that can provide this type of training.	Request Approved by James Magog, Hayley Martin and Sally Robinson 31.7.2023
Children's & Joint Commissioning Services	Joint Commissioning	Easy Peasy	London	One Off Procurement	The council have been successful in receiving funding to deliver family hubs. Easy Peasy is the only app that is available therefore the funding needs to be spent on this app. Otherwise funding will need to be returned to DfE.	Request Approved by James Magog, Hayley Martin and Sally Robinson 31.7.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					DFE stipulation that all HLE programmes funded through Family Hubs budget are approved by Early Intervention Foundation Guidebook	
Adult & Community Based Services	Adult Services	Imperium Solutions	London	One Off Procurement	Imperial Solutions are a specialist company who are experienced in providing statutory OT assessments. To support the team the Department would like to engage Imperial Solutions to provide up to 40 statutory OT assessments which will allow vulnerable adults access to services quicker.	Request Approved by James Magog, Hayley Martin and Jill Harrison – 1.8.2023
Children's & Joint Commissioning Services	Joint Commissioning	Alliance Psychological Services (service is called IMPACT)	Stockton	One Off Procurement	Alliance Psychological Services are a Tees based company that deliver the health commissioned "Talking Therapies for Anxiety and Depression" which is named IMPACT. It is requested to direct award this piece of work as the service is already established to offer this support and introducing another service would cause significant issues re: clinical governance and effective pathways for this cohort.	Request Approved by James Magog, Hayley Martin and Jill Harrison – 1.8.2023
Adult & Community Based Services	Preventative & Community Based Services	Arborcut Tree Service Ltd	Leyburn	One Off Procurement	After a recent tree survey which looked at the health, vitality and structural integrity of the trees when inspected. Based on availability, urgency of works, testaments and cost Arborcut Tree Service Ltd were the only supplier that could commit to carrying the works out prior to the end of the school holidays which is mandatory from our perspective as from September we have a full calendar of bookings and unfortunately based on machinery and areas requiring treatment this can't be carried out whilst we have groups on site.	Request Approved by James Magog, Hayley Martin and Jill Harrison – 17.8.2023

Contract Extension Information

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Adult & Community Based Services	Conservation & Countryside	Gray's Ecology	Saltburn-by-the-Sea	2.9.2022 – 31.1.2023	There is a need for the authority to have ecological advice available when it is discharging its planning function and carrying out works. The process of Job Evaluation has taken far longer than anticipated and therefore an approval only came through on 30/8/22 and the job will now be advertised however until an officer is in place, cover for the post is still required.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 5.9.2022
Adult & Community Based Services	Sport & Recreation	XN Leisure Systems Limited	Oxon	1.1.2023 – 31.3.2023	We are currently in a contract with XN Leisure until 31 st December 2022. There is now a requirement to extend the current contract for an additional 3 months, to ensure that the service is not left without <u>any</u> systems in place while the transition to a new supplier is completed.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 15.9.2022
Resources and Development	Corporate Services	SOCITM Advisory	Northampton	30.9.2022 – 1.3.2023	HBC has previously engaged with SOCITM Advisory to carry out a Best Value Review of the current ICT Managed Service contract with NEC (Northgate PS). We have also engaged their services to support the procurement of the new ICT Managed Services Contract. Additional support is required to complete the process.	Request Approved by Chris Little, Hayley Martin and Denise McGuckin – 17.12.2022
Resources and Development	Revenues & Benefits	The Access Group (formally Capita)	Essex	1.4.2023 - 31.3.2026	HBC have Capita hardware and software facilitating the collection of income e.g. cashiers, chip and pin devices, Pay360 online payment system. This exemption request is for a 3 year extension for the existing software support for this specialist software as there are limited alternative providers.	Request Approved by Chris Little, Hayley Martin and Denise McGuckin – 9.1.2023
Adult & Community Based Services	Sport & Recreation	XN Leisure Systems Limited	Oxon	1.4.2023 – 30.6.2023	HBC are currently in a contract with XN Leisure until 31 st March 2023. A contract has been awarded for a new Leisure Management System to Gladstone MRM. Although, due to delays in the process, our go-live date with them is not until 12 th June 2023. There is now a requirement for an additional 3 months on the contract with XN Leisure, to ensure that the service is not left without <u>any</u> systems in place while the transition to a new supplier is completed	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 22.2.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Resources & Development	Corporate Services	Link Treasury Services Limited	London	1.4.2023 – 31.3.2028	<p>Hartlepool Borough Council has used Link Treasury Services for Treasury Management advice for many years and they have helped us achieve significant savings in the past. This has been achieved in part owing to the long term continuity and understanding of our treasury management position and approach for managing risk. The Treasury Management advice contract supports the management of a loans portfolio of £90m and investment portfolio of £45m, as well as daily market intelligence and support for evolving technical and regulatory requirements.</p> <p>Based on consideration of these factors it is recommended that an extension of the existing arrangements provides the most appropriate and cost effective option for the Council</p>	Request Approved by Chris Little, Hayley Martin and Denise McGuckin – 22.2.2023
Adult & Community Based Services	Heritage and Open Spaces	Beckett Rankine	Westminster	13.3.2023 – 21.12.2023	<p>As part of an ongoing re-development project of the Hartlepool Marina area, Hartlepool Borough Council (HBC) and the National Museum of the Royal Navy (NMRN) have started to look in to an integrated project that relates to three historic assets. Although the intention is to tender for the ultimate design services for both the Wingfield and the Damboard, there are some urgent dive surveys that need to be carried out and reported upon and some advice required to allow the projects to move forward in the short term without detriment to the historic assets mentioned above. The services we are looking to procure are extensions to the studies already carried out by Beckett Rankine is located in Hartlepool Marina.</p>	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 10.3.2023
Resources & Development	Corporate Services	Granicus-Firmstep Limited	Cambridge	3.1.2023 – 3.1.2024	<p>HBC's Digital and Customer Services function procured the Granicus govService (formerly known as Firmstep) platform in 2017 under the Government's g-Cloud framework for a maximum period of 24 months. The govService platform provides the authority with a corporate contact management solution. Initial modules procured were digital designer, customer self-service portal and customer services portal</p>	Request Approved by Chris Little, Hayley Martin and Denise McGuckin – 16.3.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					An extension of one year is required in order to work on some developments and review the service requirements prior to re-procuring.	
Children's & Joint Commissioning Services	Joint Commissioning	Carers Federation Limited	Gateshead	1.4.2023 – 30.6.2023	From April 2013 until 2021 the Carers Federation has provided an Independent NHS Complaints Advocacy Service to a consortium of eleven local authorities across the north east. The service was monitored on a regular basis and was consistently meeting the service aims and objectives. Approval to extend the current contract for a further 3 months until 30 June 2023 is requested to allow for the service to continue whilst the new service is procured.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 24.3.2023
Neighbourhoods & Regulatory Services	Public Protection	PHS Home Solutions	Houghton Le Spring	1.4.2023 – 30.9.2023	We were awarded funding through the Sustainable Warmth Competition to deliver energy efficiency improvements to privately-owned homes in the Borough through grant aiding works such as double-glazing, air-source heat pumps and insulation. The contractor PHS Home Solutions was appointed to deliver these works on behalf of the Council following a successful procurement process. They were one of four companies invited to tender. The project was due to end on 31 March 2023 but this has now been extended through a managed closure plan to 30 September 2023 in order to be able to deliver the project in full. This procurement exemption request is requested to extend the contract length by six months in order to fulfil the contract. If we are not granted this procurement exemption we will be unable to complete our project and funding will have to be returned to DESNZ.	Request Approved by Chris Little, Hayley Martin and Tony Hanson – 24.3.2023
Children's & Joint Commissioning Services	Joint Commissioning Services	Dale Care Limited	Durham	1.4.2023 – 21.5.2023	Dale Care have provided domiciliary care services in Hartlepool since 2014. The service was recently tendered and the contract for the services commencing 1 April 2023 was awarded to Dale Care and Vestra Homecare Services. Coastal Care Ltd requested further information on the evaluation process via their legal team. Responding to	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 2.5.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
					the request to avoid legal challenge has resulted in a delay in the final contract awards.	
Children's & Joint Commissioning Services	Joint Commissioning Services	Coastal Care Limited	Hartlepool	1.4.2023 – 21.5.2023	Coastal Care Limited have provided domiciliary care services in Hartlepool since 2014. The service was recently tendered and the contract for the services commencing 1 April 2023 was awarded to Dale Care and Vestra Homecare Services. Coastal Care Ltd requested further information on the evaluation process via their legal team. Responding to the request to avoid legal challenge has resulted in a delay in the final contract awards	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 2.5.2023
Neighbourhoods & Regulatory Services	Community Safety	RingGo Ltd	Basingstoke	1.6.2023 – 31.5.2026	RingGo Ltd is our telephone payment provider and have been since the inception of Telephone payments for parking. The Tees Valley are no longer issuing a combined contract for this and are now issuing contracts for pay by phone as independent authorities . The cost of changing providers at this time would be expensive as we would need to change all of the signs, apps and back office for a new company to take over. This will be a 3 year contract with the provision to extend for an additional year if required.	Request Approved by James Magog, Hayley Martin and Tony Hanson – 2.5.2023
Adult & Community Based Services	Heritage & Open Spaces	Beckett & Rankine	Westminster	One Off Procurement	As part of an ongoing re-development project of the Hartlepool Marina area, Hartlepool Borough Council (HBC) and the National Museum of the Royal Navy (NMRN) have started to look in to an integrated project that relates to three historic assets located in Hartlepool Marina. Although the intention is to tender for the ultimate design services for both the Wingfield and the Damboard, there are some urgent dive surveys that need to be carried out and reported upon and some advice required to allow the projects to move forward in the short term without detriment to the historic assets mentioned above.	Request Approved by Chris Little, Hayley Martin and Jill Harrison – 19.5.2023

Dept.	Service Unit	Company Name	Company based at	Duration	Description	Approval
Children's & Joint Commissioning Services	Joint Commissioning	Marton Care Homes	Carnaby	3.7.2023 – 1.6.2023	<p>The Council has commissioned rehabilitation and transitional care services at West View Lodge Hartlepool since 2013. The recent tender in 2023 was aborted as we received only 2 submissions: one from a home outside of Hartlepool and one from West View Lodge. The Department felt that it would not be appropriate to commission services outside of Hartlepool as its vitally important people receive their transitional/rehabilitation locally.</p> <p>The Department proposes to extend the existing contract with Marton Care to allow time to consider, collaboratively with the ICB, alternative options for delivery of the service. Should it be decided that we would still wish to commission a 20 bed unit then we will go back out to tender.</p>	Request Approved by James Magog, Hayley Martin and Jill Harrison – 3.7.2023