

THE MINUTES OF THE MEETING
OF THE REGENERATION SERVICES SCRUTINY COMMITTEE
HELD ON MONDAY 17 SEPTEMBER 2007

Present: Councillor D Raine (Chair)
Councillors S Bishop, Mrs E M Connor,
Mrs S Forster, H High, A J Holmes,
M Routledge, Mrs B A Sloan, D J Taylor-Gooby
and C Walker

- 1 **THE MINUTES OF THE LAST MEETING** held on 2 August 2007, a copy of which had been circulated to each Member, were confirmed.
- 2 **THE MINUTES OF THE MEETING OF THE EXECUTIVE** held on 4 September 2007, a copy of which had been circulated to each Member, were submitted.

ITEM 4 - Appointment of Project Officer (North Peterlee Pathfinder Area)

A Member queried if the Project Officer for the North Peterlee Pathfinder Area had been appointed. The Scrutiny Support Manager explained that the advert had appeared on the Council's intranet as a secondment opportunity and the post was currently being processed.

RESOLVED that the information contained within the Minutes, be noted.

3 **PUBLIC QUESTION AND ANSWER SESSION**

There were no members of the public present.

4 **FEEDBACK FROM SCRUTINY MANAGEMENT BOARD**

At the last meeting of the Scrutiny Management Board held on 10 September 2007 the following issues were discussed:-

- Revised Housing Strategy 2007 - 2012
- County Durham Scrutiny Network feedback
- Scrutiny of the Children's Trust

RESOLVED that the information given, be noted.

5 **FORWARD PLAN**

Consideration was given to the current Forward Plan of key decisions which covered the period 1 September – 31 December 2007, a copy of which had been circulated to each Member.

The Scrutiny Support Manager explained that the only key decision in the Forward Plan which came under the remit of the committee was the Housing Strategy 2007 – 2012. A further report would be considered in due course.

RESOLVED that the information given, be noted.

6 DEPARTMENT OF HEALTH'S EASINGTON HEALTH PROFILE 2007

The Chair welcomed Graeme Greig, Partnership and Performance Manager from County Durham Primary Care Trust.

Mr Greig referred to East Durham Local Strategic Partnership's Annual Review and in particular the Health Improvement Groups Self-Assessment. Teenage conception rate had reduced significantly against the 1997 – 1999 average of 73.3 and steady year on year progress was being made. The 2003 – 2005 average showed a rate of 59.9. The only area higher than Easington in 1996 was Hartlepool.

Male life expectancy had increased from the 2000 baseline of 73.8 to 74.2. This still lagged behind the national average of 76.9 years. Female life expectancy was slightly lower than the 2000 baseline of 78.9 and was 78.4 and lagged behind the England average of 81.1.

With regard to suicide mortality, the County rate across the 3 years, 2003 – 2005 was lower than the national average for England. The rate in Easington reflected this downward trend. Cancer mortality rate had fallen slightly in the district. Cancer and circulatory disease made up the major burden of poor health and lower life expectancy in Easington.

Mr Greig gave an example of ward based differences in life expectancy for males and teenage conceptions. With regard to the life expectancy for males, he explained that heavy industry and mining was a major factor.

Circulatory disease remained high against the national average but was down across the 2003 – 2005 average. With regard to substance misuse referral and staying on times, there was no wait for treatment but retention rates were lower than national average by 3%.

The factors affecting health were as follows:-

- **long term limiting illness**

Almost 29,000 adults considered themselves to have a long term limiting illness. At 30.8% of the population, this was the highest in England and Wales.

- **carers**

There were almost 12,000 unpaid carers in the district with 3,614 providing care for more than 50 hours each week. This again was one of the highest rates in England and Wales.

- **permanently sick or disabled**

Over 11,000 people described themselves as permanently sick or disabled.

The Health Sub-Group had reviewed the short, medium and long term measures that would improve health and reduce health inequalities to meet national and local targets for increasing life expectancy and reducing cancer and CHD death rates. The Health Improvement Group used the review as a basis for the Health Improvement Group Action Plan and to prioritise NRF commissioning.

Regeneration Services Scrutiny Committee – 17 September 2007

The priority areas for action were:-

- smoking cessation and tobacco control - Smoking was the leading cause of lung cancer and heart disease. Easington had the second best performance of stopping smoking service in the country.
- obesity and over weight
- teenage pregnancy
- early recognition of cancer
- men's health - Men had worse health than women and engaging men with prevention measures and services was essential. There was an NRF supported project which worked with men checking their cholesterol and blood pressure.
- alcohol misuse - Development of the first Easington Alcohol Action Plan 2006/2008

Mr Greig explained that NRF service improvements were as follows:-

- Alcohol Strategy and Integrated Team
- Cancer Awareness Programme
- Healthy Living Resource Centre which would be located at Paradise Lane in Easington Colliery
- teenage pregnancy/support for young parents
- preventing obesity in children and young people through physical activity
- promoting men's health

The Healthy Living Resource Centre would be open partially on October 15 and the official opening date for the centre was November 5.

It was explained that there was strong partnership work and a 'can do' culture. They had an evidence based approach and long term plans with decreasing death rates and improving life expectancy. However, Easington remained behind the national average. There was a strategic focus to be maintained on smoking, obesity, alcohol, teenage conceptions and reducing health inequalities with measurable outcomes for local people.

A Member commented that Easington always received a lot of bad publicity which had affected the economy of the North East. He queried if industrial diseases for example, asbestosis was taken into consideration. When the figures were being prepared if industrial disease was taken out of the figures then they would be more favourable.

Mr Greig explained that industrial diseases would have an impact. Even if they were taken out Easington still had poor health. Overweight and obesity was a major issue although people now lived longer and the heart disease rate had improved. If the overweight and obesity agenda was not tackled then Easington would lose out on what they had gained.

A Member commented that alcohol was a huge cause for some of the problems. Mr Greig explained that there had been no Alcohol Action Plan for the district until the previous year. Alcohol was a cause of cancer in the mouth and throat and was linked to crime and disorder and domestic violence. He added that he could provide Members with a copy of the Alcohol Action Plan.

A Member queried if it was intended to target areas that had problems and if there was any capital back up. Mr Greig explained that there was a partnership package of NRF funding and PCT funding. There was poor health across the district but some areas were worse than others. All programmes were NRF funded and would be mainstreamed.

The Chair thanked Mr Greig for his attendance.

RESOLVED that the information given, be noted.

7 **SERVICE UNIT PERFORMANCE REPORTING – PLANNING AND BUILDING CONTROL SERVICES**

Consideration was given to the report of the Head of Planning and Building Control Services which provided information on the performance of the Planning and Building Control Services Unit, a copy of which had been circulated to each Member.

BVPI performance improvement during 2006/7 focussed on BV109, determination of planning applications. Outturn figures for the year confirmed that all BVPI targets had been met. The first quarter results for 2007/8 indicated that the performance improvement trend had continued and service targets for major and minor applications had been exceeded.

Ambitious stretch targets had been set for 2007/8 and the ‘other applications’ category so as to achieve high quartile performance. Whilst significant performance improvements had already been made in the first quarter when compared to 2006/7 performance, the service had yet to exceed 92% performance which would achieve the high quartile performance. Weekly monitoring and management of applications will help the service to achieve further performance improvement and a Performance Improvement Plan was now in preparation to ensure that the improvement trend continued.

Members were advised that all milestones for the production of the new Easington Development Framework had so far been met although preparation of the next stage in plan production, the “Preferred Option” document may fall behind schedule. This was partially due to staffing problems and also because of the need to divert staff onto more pressing service priorities including the delivery of a Strategic Housing Market Assessment which would underpin plan production across the county.

Achievement of all of the BV109 targets described in the report had helped to increase the amount of Planning Delivery Grant received. £230,189 of grant had been achieved this year compared to £132,318 the previous year. The increased income would be used to fund improved staffing levels, software upgrades and policy studies to support the development of the Easington Development Framework.

In July, the Council agreed to use the Planning Delivery Grant accumulated to date to address a number of staffing and structural issues in the Service Unit. Appointments had since been made to reduce the number of planning applications per case officer to the level recommended by the government and also to fill vacant posts in the

Regeneration Services Scrutiny Committee – 17 September 2007

planning policy team to provide the resources necessary to deliver the Easington Development Framework. Both services were now fully staffed.

A new Engineering Manager had been appointed but he had just been informed that he would now not be taking up the post. A report was to be discussed by Management Team the following week and interim measures would be put in place.

The Land Charges function was transferred to the Planning and Building Control Unit as part of the changes agreed by Council in July and further work was now underway to implement changes to the Technical Support and Enforcement functions.

A Member referred to enforcement and the problems that had been experienced following up enforcement cases. The Head of Planning and Building Control Services explained that one of the staff changes was to appoint a third Enforcement Officer which would be going out to advert shortly. There was always a lot of enforcement work that required prioritisation although the majority of enforcement was resolved without taking legal action.

The Chair explained that a lot of applications were dealt with by delegated powers and explained that he felt that local Members should be kept aware of what had been approved and refused in their area. The Head of Planning and Building Control Services explained that at the end of every week a list was produced detailing decisions on delegated applications. He added that he would circulate this list to Members of the committee.

The Chair thanked the Head of Planning and Building Control Services for his report.

RESOLVED that the information given, be noted.

8 ANY ADDITIONAL URGENT ITEMS OF BUSINESS

In accordance with the Local Government Act, 1972, as amended by the Local Government (Access to Information) Act 1985, Section 100B(4)(b) the Chair, following consultation with the Proper Officer, agreed that the following item of business, not shown on the Agenda, be considered as a matter of urgency.

9 DISTRICT COUNCIL'S TELEPHONE SYSTEM

A Member commented that an article had been printed in the Sunderland Echo regarding the District Council's telephone system. He had received several complaints from members of the public that they were waiting long periods of time for the phone to be answered at the Contact Centre.

The Scrutiny Support Manager explained that he would refer this matter to the Resources Scrutiny Committee for further investigation.

RESOLVED that the District Council's telephone system be referred to Resources Scrutiny Committee for further consideration.