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## SCRUTINY BOARD (HEALTH AND WELL-BEING AND ADULT SOCIAL CARE)

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Meeting to be held in Civic Hall, Leeds, LS1 1UR on  
Monday, 10th June, 2013 at 1.30 pm

*(A pre-meeting will take place for ALL Members of the Board at 1.00 pm)*

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### MEMBERSHIP

#### Councillors

- G Hussain - Roundhay;
- J Walker - Headingley;
- C Fox - Adel and Wharfedale;
- K Bruce - Rothwell;
- J Illingworth (Chair) - Kirkstall;
- S Varley - Morley South;
- M Robinson - Harewood;
- J Lewis - Kippax and Methley;
- E Taylor - Chapel Allerton;
- C Towler - Hyde Park and Woodhouse;
- S Lay - Otley and Yeadon;

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*Please note: Certain or all items on this agenda may be recorded*

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# A G E N D A

Item No	Ward/Equal Opportunities	Item Not Open		Page No
1			<p><b>APPEALS AGAINST REFUSAL OF INSPECTION OF DOCUMENTS</b></p> <p>To consider any appeals in accordance with Procedure Rule 25* of the Access to Information Procedure Rules (in the event of an Appeal the press and public will be excluded).</p> <p>(* In accordance with Procedure Rule 25, notice of an appeal must be received in writing by the Head of Governance Services at least 24 hours before the meeting).</p>	
2			<p><b>EXEMPT INFORMATION - POSSIBLE EXCLUSION OF THE PRESS AND THE PUBLIC</b></p> <p>1 To highlight reports or appendices which officers have identified as containing exempt information, and where officers consider that the public interest in maintaining the exemption outweighs the public interest in disclosing the information, for the reasons outlined in the report.</p> <p>2 To consider whether or not to accept the officers recommendation in respect of the above information.</p> <p>3 If so, to formally pass the following resolution:-</p> <p><b>RESOLVED</b> – That the press and public be excluded from the meeting during consideration of the following parts of the agenda designated as containing exempt information on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present there would be disclosure to them of exempt information, as follows:</p> <p><b>No exempt items have been identified on this agenda.</b></p>	

Item No	Ward/Equal Opportunities	Item Not Open		Page No
3			<p><b>LATE ITEMS</b></p> <p>To identify items which have been admitted to the agenda by the Chair for consideration.</p> <p>(The special circumstances shall be specified in the minutes.)</p>	
4			<p><b>DECLARATION OF DISCLOSABLE PECUNIARY INTERESTS</b></p> <p>To disclose or draw attention to any disclosable pecuniary interests for the purposes of Section 31 of the Localism Act 2011 and paragraphs 13-16 of the Members' Code of Conduct.</p>	
5			<p><b>APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTES</b></p> <p>To receive any apologies for absence and notification of substitutes.</p>	
6			<p><b>MINUTES - 24TH APRIL 2013</b></p> <p>To confirm as a correct record, the minutes of the meeting held on 24<sup>th</sup> April 2013.</p>	1 - 8
7	Hyde Park and Woodhouse		<p><b>HEALTH AND WELLBEING OF PEOPLE LIVING IN HYDE PARK AND THE NEED FOR LOCAL SCHOOLS AND COMMUNITY TO ACCESS SPORTS AND LEISURE FACILITIES</b></p> <p>To receive and consider a report from the Head of Scrutiny and Member Development inviting the Scrutiny Board to discuss a number of issues raised in the Executive Board report in relation to the Council's duties as a Planning Authority and its Public Health role.</p>	9 - 26
8			<p><b>DATE AND TIME OF THE NEXT MEETING</b></p> <p>Friday, 21<sup>st</sup> June 2013 at 10.00am in the Civic Hall, Leeds (Pre meeting for Board Members at 9.30am)</p>	

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# Agenda Item 6

## SCRUTINY BOARD (HEALTH AND WELL-BEING AND ADULT SOCIAL CARE)

WEDNESDAY, 24TH APRIL, 2013

**PRESENT:** Councillor J Illingworth in the Chair

Councillors P Truswell, T Murray, J Walker,  
C Fox, S Varley, S Bentley and M Harland

### CO-OPTED MEMBERS:

Joy Fisher, Patient representative  
Sally Morgan, Equality Issues  
Betty Smithson, Patient representative  
Emma Stewart, Alliance of Service Users and Carers

#### 103 Chair's Opening Remarks

The Chair welcomed everyone to the April meeting of the Scrutiny Board (Health and Well-Being and Adult Social Care).

#### 104 Late Items

There were no formal late items of business to consider, however the Chair agreed to accept the following as supplementary information:-

- Scrutiny Board (Health and Wellbeing and Adult Social Care) – Minutes of Meetings held on 20<sup>th</sup> February 2013 and 27<sup>th</sup> March 2013 (Agenda Item 6) (Minute 107 refers)
- Leeds Dementia Action Plan 2012-13 (Agenda Item 8)(Minute 110 refers)
- Review of Adult Congenital Heart Disease (ACHD) Services – Notes of a meeting between the Chair and the Consultant in Adult Congenital Heart Disease (Leeds Teaching Hospitals NHS Trust (LTHT) held on 22 April 2013 (Agenda Item 9)(Minute 111 refers)

The documents were not available at the time of the agenda despatch, but made available to the public on the Council's website.

#### 105 Declaration of Disclosable Pecuniary Interests

- Councillor P Truswell, Joy Fisher, Emma Stewart, Sally Morgan and Betty Smithson declared a non-pecuniary interest in Agenda Item 7 'Healthwatch Leeds – Progress Update' as Members of LINK (Minute 109 refers)
- Councillor S Varley declared a non-pecuniary interest in Agenda Item 10 'Work Schedule' due to the fact that she was a Member of the Cross Party Board for the Charging Review (Minute 112 refers)

**106 Apologies for Absence and Notification of Substitutes**

Apologies for absence were received on behalf of Councillors G Hussain, K Bruce and M Robinson.

Notification had been received for Councillor M Harland to substitute for Councillor G Hussain.

**107 Minutes - 20th February 2013 and 27th March 2013**

**RESOLVED –**

- a) That, subject to the inclusion of the Co-opted Members i.e. Joy Fisher, Sally Morgan, Betty Smithson and Emma Stewart within the attendance list, the minutes of the meeting held on 20<sup>th</sup> February 2013 be approved as a correct record.
- b) That the minutes of the meeting held on 27th March 2013 be approved as a correct record.

**108 Matters Arising from the Minutes**

- a) Leeds HealthWatch – HealthWatch Leeds (Minute 89 refers)  
The Chair informed the meeting that, on behalf of the Board, he would write to the Chief Executive, Leeds City Council, regarding some personnel matters that had been drawn to members' attention.
- b) Charges for Non-Residential Adult Social Care Services (Minute 98 refers)  
The Principal Scrutiny Adviser informed the meeting that the minutes of the Scrutiny Board Working Group held on 12<sup>th</sup> April 2013 were included within the Executive Board report, scheduled for consideration at the Executive Board meeting later that day (i.e. 24 April 2013).

**109 HealthWatch Leeds - progress update**

Referring to Minute 84 of the meeting held on 20<sup>th</sup> February 2013, the Head of Scrutiny and Member Development submitted a report providing an update on the arrangements for establishing and developing HealthWatch Leeds as the new local consumer champion for both health and social care.

Appended to the report was a copy of a document entitled '10 questions to ask if you're scrutinising arrangements for effective local Healthwatch' produced by the Centre for Public Scrutiny for the information/comment of the meeting.

The following representatives were in attendance and responded to Members' queries and comments:-

- Linda Phipps, Chair, HeathWatch Leeds
- John Beech, Mobilisation ManagerHealthWatch Leeds

At the request of the Chair of the Scrutiny Board, the HealthWatch Leeds representatives briefly outlined their vision for HealthWatch Leeds and commented on the work to be undertaken over the coming months ahead.

The Chair of HealthWatch Leeds:

- acknowledged the previous work undertaken with the Scrutiny Board, in her role as an expert advisor representing the Centre for Public Scrutiny (CfPS); and,
- thanked the Scrutiny Board for the opportunity to attend the meeting and discuss the developing role of HealthWatch Leeds.

It was outlined that an essential role for HealthWatch Leeds would be to:

- Listen effectively and gather the views service users; and
- Use those views to influence service commissioners and service providers.

The development of the HealthWatch Leeds Board and the development of volunteers were highlighted as two important strands of activity over the next 3 months or so (100 days).

It was also highlighted that following the recent publication of the Fancis Inquiry report (related to the events at Mid Staffordshire NHS Foundation Trust), there was general sense of intent across the NHS, to actively listen to the service user voice. However, it was noted that it was far too early to assess such intent by way of clear and demonstrative actions.

A discussion took place, covering a range of topic areas and questions/ comments made by members of the Scrutiny Board, including:

- The development of volunteers and providing clarity around HealthWatch Leeds' 'volunteer offer';
- The impact of the patient champion role and the current national debate about the appropriateness/ legality of HealthWatch organisations reflecting the views of service users and 'publically opposing' proposals put forward for service changes / developments;
- The re-engagement of former Local Involvement Network (LINK) members
- The staffing structure of HealthWatch Leeds and proposed recruitment processes;
- Taking forward learning points from the former Local Involvement Network (LINK) organisation;
- Identifying priorities and the development of 'prioritisation criteria' to help shape the future work programme for HealthWatch Leeds;
- The need, and desire, for the Scrutiny Board and Healthwatch Leeds to adopt a collaborative/ complementary working style;

Members of the Scrutiny Board also provided some specific feedback/ learning points following a recent event hosted by HealthWatch Leeds. The points were noted by the HealthWatch Leeds representatives attending the meeting.

The Chair of Leeds HealthWatch thanked the Scrutiny Board Members for its comments and referred to the following three key action points for HealthWatch Leeds to take forward:-

- Remaining close to HealthWatch England in general and specifically in relation to the development of regulations that will govern the operation of local HealthWatch organisations across England. Establishing a functional HealthWatch Leeds Board by the end of May/early June and to develop a work future programme
- Working collaboratively with other organisations/ bodies, including the Health Scrutiny Board

The Chair of the Scrutiny Board thanked the Chair of HealthWatch Leeds and the Mobilisation Manager for their attendance and contribution to the discussion.

**RESOLVED-**

- a) That the contents of the report and appendices be noted.
- b) That the Chair be requested to write to the Secretary of State (for Health) regarding the Board's view on the role of local HealthWatch as the new local public/ patient champion for both health and social care, and the associated regulations necessary to support such a role.

**110 Leeds Dementia Strategy - progress update**

Referring to Minute 80 of the meeting held on 23<sup>rd</sup> January 2013, the Head of Scrutiny and Member Development submitted a report providing an update on the progress of the Leeds' draft Dementia Strategy – *Living Well with Dementia in Leeds (2012-2015)* and development of the associated action plan.

In addition to the above report, Board Members received a copy of the Leeds Dementia Action Plan 2012-13 as supplementary information.

The following representatives were in attendance and responded to Members' questions and comments:-

- Mick Ward (Head of Commissioning) – Leeds City Council, Adult Social Services
- Tim Sanders (Integrated Commissioning and Transformation Manager, Dementia) – Leeds City Council, Adult Social Care

At the request of the Chair, the Integrated Commissioning Officer gave a brief PowerPoint presentation on the priority areas covered within the Leeds Dementia Action Plan 2012-13.

Following the presentation, members of the Scrutiny Board raised and discussed a number of issues in relation to dementia sufferers and their carers, including:

- Protecting vulnerable adults and safeguarding considerations;



- Potential impact of ‘cold-calling’ and door-step selling;
- The 3-year and 1-year timeframes for the Strategy and Action Plan documents, respectively;
- How the needs of carers, and associated funding, were identified and prioritised;
- Seeking best value from service providers; The changing ‘funding landscape’ and comparisons with other cities;
- The role of other agencies (for example the Police Service, the Fire and Rescue Service and Trading Standards) in supporting early interventions;
- Sustainability of identified actions and available resources

The Chair of the Scrutiny Board thanked the Head of Commissioning and the Integrated Commissioning and Transformation Manager for their attendance and contribution to the discussion.

**RESOLVED-**

- a) That the contents of the report and supplementary information be noted.
- b) That the Leeds Dementia Strategy be revisited by the Scrutiny Board in the new municipal year (2013/14).

**111 Review of Adults with Congenital Heart Disease - engagement on revised proposals**

The Head of Scrutiny and Member Development submitted a report seeking the views of the Scrutiny Board in relation to revised proposals, in terms of the proposed model of care and draft designation standards, associated with the national review of services for Adults with Congenital Heart Disease (ACHD).

Appended to the report was a copy of a document entitled ‘Review of Adult Congenital Heart Disease Services – Engagement on Proposed Model of Care and Draft Designation Standards – 11 April-10 May 2013 –NHS England – April 2013’ for the information/comment of the meeting.

In addition, notes of a meeting between the Chair and a Consultant in Adult Congenital Heart Disease (Leeds Teaching Hospitals NHS Trust (LTHT)) held on 22 April 2013 were circulated as supplementary information.

The following issues were raised and discussed:-

- Support from NHS England to help stakeholders consider the revised proposals in order to provide informed responses;
- The previous findings and recommendation of the Joint Health Overview and Scrutiny Committee (JHOSC) for Yorkshire and the Humber;
- The proposed standard regarding co-location of cardiac surgery services for adult and children, and the associated implications;
- The proposed standard regarding co-location of other services, and the associated implications;

- Clarification regarding the term/ definition of 'co-located services';
- The assessment of the proposed standards in terms of the impact on current services/ providers and the practicalities associated with implementation;
- Impact of the delay of the Review of Children's Congenital Cardiac Services in England and the potential for combining the reviews of services for adults and children (as part of this discussion it was noted that NHS England was now the responsible body for both reviews);
- Concerns over an apparent 'blindness' of each review regarding affordability for patients;
- The potential 'domino effect' of losing specialist services and the potential implications for patients, the Trust and the local health economy.

In concluding discussions, the Chair informed the meeting that interested parties were invited to provide comments on the revised model of care and draft designation standards no later than 10<sup>th</sup> May 2013.

**RESOLVED –**

- a) That the contents of the report, appendices and supplementary information be noted.
- b) That, reflecting the comments made at the meeting, the Principal Scrutiny Adviser be requested to prepare a response on the revised model of care and draft designation standards by the 10<sup>th</sup> May 2013 deadline.

(Councillor J Walker left the meeting at 12 noon during discussions of the above item)

**112 Work Schedule - April 2013**

The Head of Scrutiny and Member Development invited the Board to make comments on the work schedule for the current/new municipal year.

The following areas were highlighted as potential future items:-

- Narrowing the Gap in Leeds
- Welfare reforms and the impact on health
- Emergency Care and A&E services
- Obesity in young people
- Developing the '111' service locally
- End of life care and bereavement care

The Principal Scrutiny Adviser responded and confirmed the need for the Board to prioritise its work schedule in view of the potential scope of the remit for the Scrutiny Board.

In addition to the above items, the Principal Scrutiny Adviser outlined the following items which were requiring inclusion within the work schedule:-

- Children's and Adult Cardiac Services;
- Services for the Blind – follow-up from the working group meeting held on 21 March 2013;
- Charging for non-residential services – it was reported that the Scrutiny Board's feedback was due to be considered by the Executive Board at its meeting later that day (i.e. 24 April 2013);
- Proposals for Unplanned dental services across West Yorkshire;
- Quality Accounts;
- Commissioning plans.

The Principal Scrutiny Adviser informed the Board that the correspondence relating to the Quality Accounts was very detailed and, in some cases, required quick response by the Board during May 2013. Members discussed the potential options for considering the draft quality accounts from the main healthcare providers in Leeds. It was agreed that hard copies of the documentation would be distributed amongst the Board in order to make best use of the Board's available resources (i.e. the draft quality account of one provider to be shared randomly with (at least) two Board Members).

**RESOLVED –**

- a) That the current position of the work schedule be noted.
- b) That further discussions be undertaken between the Chair and the Principal Scrutiny Adviser with regards to prioritising the work schedule for further consideration at the next meeting.
- c) That in relation to the Quality Accounts, the Principal Scrutiny Adviser be requested to distribute the documentation as agreed at the meeting.

(Councillor P Truswell left the meeting at 12.10pm during discussions of the above item)

(Councillor M Harland left the meeting at 12.15pm during discussions of the above item)

**113 Date and Time of the Next Meeting**

Date of additional May Scrutiny Board meeting to be confirmed.

(The meeting concluded at 12.30pm)

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## Report of Head of Scrutiny and Member Development

### Report to Scrutiny Board (Health and Wellbeing and Adult Social Care)

Date: 10<sup>th</sup> June 2013

### Subject: Health and Wellbeing of people living in Hyde Park and the need for local Schools and Community to access Sports and Leisure Facilities

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

## 1 Introduction

- 1.1 On 9<sup>th</sup> May 2013 Executive Board received and discussed a joint report from the Director of Public Health and the Chief Planning Officer. (Appendix 1)
- 1.2 This report responded to the deputation presented to the full Council meeting on 12<sup>th</sup> September 2012 from the Hyde Park Olympic Legacy Committee regarding the health of people in Hyde Park and the need for local schools and community to access sports facilities. The relevant Executive Board minutes is shown as Appendix 2
- 1.3 Following representation from a number of Councillors, the Chair has agreed to convene a meeting of the Health and Wellbeing and Adult Social Care Scrutiny Board discuss a number of issues raised in the Executive Board report in relation to the Council's duties as a Planning Authority and its Public Health role. A note setting out the legal position is attached as Appendix 3. Relevant officers have been invited to attend the meeting.

## 2 Recommendations

- 2.1 Members are asked to consider the attached reports and make appropriate comment, observations and recommendations.

### **3 Background papers<sup>1</sup>**

None used

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<sup>1</sup>The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

**Report of the Director of Public Health and the Chief Planning Officer**

**Report to Executive Board**

**Date: 9<sup>th</sup> May 2013**

**Subject: Health and Wellbeing of people living in Hyde Park and the need for local schools and community to access sports and leisure facilities.**

Are specific electoral Wards affected?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If relevant, name(s) of Ward(s):</b> Hyde Park & Woodhouse and Headingley		
Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, Access to Information Procedure Rule number:		
Appendix number:		

**Summary of main issues**

1. Impact of the proposed retail and housing development at Victoria Road on the Health and Wellbeing of the residents of Hyde Park
2. Planning and access to sports facilities.

**Recommendations**

Executive Board is asked to note that this is an area acknowledged as having a deficiency in sports facilities and pitches. Whilst recognising the role of the Local Planning Authority the Executive Board is recommended to support the principle of enhancing opportunities for the local community to engage in physical activity to improve health and wellbeing in the area.

**Purpose of this report**

- 1.1. This report is a response to the Deputation to Full Council 12 September 2012 (appended to this report) and seeks to respond to the issues raised in respect of the Council's role as the lead organisation to improve health and reduce health inequalities locally and the role of the Council as Local Planning Authority.
- 1.2. The Deputation speech concerns community access to sports facilities and was prompted by a planning application (12/02491/OT) for a retail and housing development on a site at Victoria Road, Hyde Park. This site has a sports hall and swimming pool and a grass pitch.

This application would have been referred to the South and West Plans Panel for a decision and considered by that Panel on its merits in the light of prevailing planning policy and any other material planning considerations. The application was however withdrawn on the 5 November 2012. A revised application was submitted on 20<sup>th</sup> February 2013 and will be considered by Members at a future meeting of the South & West Plans Panel.

- 1.3. A report was presented to Executive Board on 12<sup>th</sup> December 2012 responding to the Deputation. However, following receipt of legal concerns which related to the submitted report, the consideration of this matter was deferred to a future Executive Board meeting, in order to enable further work to be undertaken to address such concerns.

## **2. Background information**

- 2.1. The Leeds City Priority Partnership Plan includes priority indicators leading to improved health and wellbeing. These include increased healthy life expectancy for all, and reduction in the differences in life expectancy and healthy life expectancy between communities. Achieving these outcomes will be a measure of the success of actions taken across the whole business of Leeds City Council and partners.
- 2.2. The Health and Social Care Act 2012 (HSCA) Section 12 states that each local authority must take such steps as it considers appropriate for improving the health of the people in its area.
- 2.3. The Chestnut Avenue/Victoria Rd playing fields are situated in the centre of a residential area that houses people living with greater socio-economic disadvantage than the average for Leeds. The consequent impact of this disadvantage is to contribute to the physical and mental health problems that affect the local population, and ultimately lead to higher levels of premature mortality. The health of people living in this area has been assessed in the Leeds Joint Strategic Needs Assessment. The rate of premature mortality (before age 75 years) is higher than the average for Leeds with the principle causes identified as cancers in both men and women and Cardio-Vascular Disease in women.
- 2.4. There is now a planning approval which establishes the principle of housing on the land which was formerly part of the Leeds Girls High School (LGHS) which provided open space and tennis courts for that school. In 2008 the school became part of the Grammar School at Leeds (GSAL) which has a site at Alwoodley and at that time this site (and the main school site on the opposite side of Victoria Road) closed and the sports and other school functions transferred to the Alwoodley site, including a new swimming pool and enhanced sports pitch provision. This site, in addition to the school buildings, contains a number of former tennis courts and open grassed areas.
- 2.5. A Public Inquiry into the development on the main school site was held in July 2011. Although the Inspector dismissed the appeal this was essentially on matters of detail, the Inspector did not consider that refusal of the application was justified on grounds of loss of the playing pitches or implications for public health. .
- 2.6. The deputation raised concerns about the inadequate provision of playing space at a number of state schools. There are five primary schools in the area; Brudenell Primary, Blenheim Primary, Quarry Mount Primary, Little London Primary and Rosebank Primary. Two of these have grass sports pitches; only one of which is meets national external space guidance for a school of its size. Four of the five schools are classified as being on a confined site, which requires pitch provision to be provided off-site. Indoor sporting provision is limited at three of the five schools by the size of the school hall and the need for this space to be used for dining.



- 2.7. School Premises Regulations were revised in 2012; and this revision removed the minimum statutory external space requirement for schools. In its place, schools other than pupil referral units are now required to provide 'suitable outdoor space' in order to enable physical education to be provided to pupils in accordance with the school curriculum; and to enable pupils to play outside

### **3. Main Issues**

#### Summary of the Deputation speech

- 3.1. The Deputation Speech sets out as a background the need for the local schools and community to access decent sports facilities. It is pointed out that those in inner city areas tend to die on average 10-12 years earlier than those in the outer suburbs. Exercise can help to redress that balance, but 5 of the primary schools in the area are described as seriously deprived in terms of space for participation in active sport. Reference is made to the Health and Social Care Act and the obligation of the Council to narrow the health gap.
- 3.2. The Deputation goes on to reference the Victoria Road site subject to the (then) current planning application and suggests that the site could accommodate valuable community sports facilities.
- 3.3. The Deputation then sets out a concern regarding the publicity for the recently withdrawn planning application being done at the commencement of school holidays. Sport England is criticised as supporting the transfer of facilities to the outskirts of the city and there follow criticisms of Education Leeds and the content of Planning Reports.

#### Sport and Active Lifestyles in The City

- 3.4. Before considering the specific details relating to the deputation some wider context is provided in terms of the Council's commitment to sport and being active.
- 3.5. The Council has a long tradition in providing and encouraging the development of sport in the city from grass roots right through to the elite performers, including our Olympic and Paralympic medallists from last year's London Olympic Games. This commitment has helped Leeds reach 13<sup>th</sup> of all local authority areas in terms of Sport England's latest "Active People" survey and by far the most active of all the core cities. This achievement is not solely down to what the Council directly provides, rather its is a reflection of the wider sports community including voluntary sector, colleges, professional clubs, coaches, public and private sectors.
- 3.6. In the context of large scale budget reductions the Council remains committed to providing sustainable sports opportunities. In September 2012 the Council's Executive Board approved a report titled 'Inspire a Generation' which made a number of recommendations to maximise the legacy of the 2012 Olympic and Paralympic Games by increasing participation in sport and physical activity to contribute to improving health in the City. The report references a number of city wide initiatives that could seek to extend opportunities for people to take part in sport and physical activity and includes extending rate relief for voluntary clubs and providing a legacy fund. The report also included reference to exploring ways of offering more opportunities to local people where levels of participation are lowest and where there may not be traditional sports facilities. To support this Leeds has made a successful bid to Sport England's national 'Get Healthy, Get into Sport' fund. The Leeds scheme will be known as "Leeds Let's Get Active".
- 3.7. By way of illustrating current development work in the area the Council is seeking to maximise the use of community recreational facilities located near to the former LGHS site including Woodhouse Moor, which has sports facilities including tennis courts. In conjunction

with the Lawn Tennis Association, plans are being developed to increase participation in tennis playing among the local community. A number of community sports clubs are also located in the area including Hyde Park Harriers, Hyde Park Rovers Junior Football Club and Hyde Park United. The council's Sport and Active Lifestyles Service has officers who can support these clubs to increase participants.

#### Improving Health and Wellbeing, and Reducing Health Inequalities

- 3.8. The relationship between the availability of sports facilities, exercise and public health is important. Moreover participation in physical activity such as sports and walking is strongly related to household income. There is an association between reducing levels of physical activity and decreasing household income with the potential to increase health inequalities.
- 3.9. The Victoria Road site is situated in a residential area that houses people living with greater socio-economic disadvantage than the average for Leeds. The consequent impact of this disadvantage is to contribute to the physical and mental health problems that affect the local population, and ultimately lead to higher levels of premature mortality.
- 3.10. The presence of the urban green space provided by the playing fields can impact positively on the health of the local population in many ways. Proximity and accessibility of green spaces to residential areas can lead to:
- increased overall levels of physical activity across age groups which contribute to the prevention of many health problems such as cardiovascular disease, diabetes, stroke, some cancers and osteoporosis;
  - improved mental health and well-being providing effective relief from everyday stress, improved self esteem, and alleviation from anxiety and depression;
  - increased opportunities for education, social inclusion and cohesion by supplying space for social mixing, creating networks and relationships. Playing in local green spaces helps children to develop intellectually and learn about social interaction;
  - a contribution in reducing flood risk, reducing atmospheric pollution and traffic/residential noise.
- 3.11. The presence of a visible and useable urban green space can contribute to the health and wellbeing of the community. Therefore the availability of the green space provided by Chestnut Avenue/Victoria Rd playing fields is an important consideration in addressing the needs of this community.
- 3.12. Section 12 of the Health and Social Care Act 2012 provides that each local authority must take steps as it considers appropriate for improving the health of the people in its area. Whilst this will be relevant to planning decisions, it does not alter the fact that planning decisions are still required under the Planning Acts to be made in accordance with the development plan unless material considerations indicate otherwise (including the policies contained in the National Planning Policy Framework).

#### Permission for development on the main former GSAL site

- 3.13. Prior to advising the Plans Panel on the weight to be afforded to the loss of the former tennis courts on the main former GSAL site, the Chief Planning Officer sought the opinion of Vincent Fraser, QC, on the loss of playing pitch issue. The advice was very clear – the facilities had been replaced elsewhere and the aim of Policy N6 of the UDPR (which addresses the loss of protected playing pitches) had been met.

- 3.14. Provision for sport and recreation and open space is a key consideration of the planning system and this was a key consideration debated at the Public Inquiry into the development of the main school site on the opposite side of Victoria Road. The application involved the loss of the previous sports provision (former tennis courts) on land which is moreover a Protected Playing Pitch in the adopted Unitary Development Plan. On this issue the Planning Inspector was clear; there had been no community access to the tennis courts which served the private school only. Alternative superior provision had been provided at the Alwoodley site and moreover there is community access to those facilities. The Planning Inspector in his report said that he had had careful regard to the evidence on health issues presented at the Inquiry, but concluded that as there had been no public access to the facilities the development of the site could not itself be harmful to the health and well-being of the community.

### Planning changes since the GSAL Public Inquiry

- 3.15. Since publication of the Inspector's report into the previous appeal in July 2011, the Health and Social Care Act has come into force, and the implications of this are addressed elsewhere in this report
- 3.16. In addition, the Government has subsequently greatly simplified previous planning guidance through publication of the National Planning Policy Framework in March 2012. The guidance maintains the Government's position that applications for planning permission must be determined in accordance with the development plan unless material considerations indicate otherwise and goes on to state that 'At the heart of the NPPF is a presumption in favour of sustainable development'. For decision takers this means 'approving development proposals that accord with the development plan without delay'. The NPPF states that existing open space, sports and recreational buildings and land, including playing fields, should not be built on although a number of exceptions are set out including that 'the loss resulting from the proposed development would be replaced by equivalent or better provision in terms of quantity and quality in a suitable location'. This is essentially the same test that was examined at the Public Inquiry referred to above.
- 3.17. It should also be noted that important mature trees on the Victoria Road site have been protected through a Tree Preservation Area since submission of the withdrawn planning application, and these trees will be an important consideration relative to any development proposals for the site.

### The Victoria Road Proposals

- 3.18. The Victoria Road case differs somewhat from the application to develop the land including the former tennis courts on the main school site. Although both sites include land designated as Playing Pitches in the Unitary Development Plan Review 2006, the statutory plan for Leeds, in the case of those former tennis courts, there had been no public access. The courts were used by the private school only. In the Victoria Road case, there has been limited community use.
- 3.19. Sport England is the Government agency responsible for sport and is a Statutory Consultee on planning applications that affect playing fields. This means that any planning application that affects a playing field has to be referred to Sport England for comment by the local authority.
- 3.20. It is Sport England's policy to object to any planning application, which will result in the loss of a playing field, unless it meets one of five exceptions. In addition, where a local authority is minded to grant planning permission against Sport England's advice the matter may be

referred to the Secretary of State for Communities and Local Government for possible 'call in', taking the decision making power away from the local authority. They chose not to object to the earlier application on the Victoria Road site.

- 3.21. Section 12 of the Health and Social Care Act states that each local authority must take steps as it considers appropriate for improving the health of the people in its area. We will be assessing the relevance of the NPPF and the Public Health Act to the new planning application at Victoria Road.

#### **4. Corporate Considerations**

- 4.1. **Consultation and Engagement** The Victoria Road planning application has been publicised by means of advertisements in the press and notices placed around the site and officers have briefed Ward Members directly. The Council is carrying out statutory consultation with relevant consultees on the planning application including the Highway Authority and Sport England. The applicant has carried out some community consultation events but did not undertake a pre-application consultation process with the Planning Authority or local community representatives as recommended in such situations. Any future planning applications will be subject to separate consultation as required by the Development Management Procedure Order 2010 and LCC requirements.

#### **4.2. Equality and Diversity / Cohesion and Integration**

- 4.2.1 Equality is central to the deputation speech in terms of sports provision in the inner areas and it is acknowledged that less advantaged communities in the city have poorer access to facilities.

#### **4.3. Council policies and City Priorities**

- 4.3.1 Relevant Council policies are referred to above.

#### **4.4. Resources and value for money**

- 4.4.1 The decision on the new Victoria Road planning application rests with the Plans Panel South & West. If the refusal of the application on grounds of loss of sports facilities cannot be adequately substantiated, such a refusal could result in an award of costs against the Council following an appeal.

#### **4.5. Legal Implications, Access to Information and Call In**

In respect to future planning applications of a similar nature to that which was withdrawn, a refusal on grounds which could not be adequately substantiated at appeal would carry a high risk of costs being awarded against the Council on grounds of unreasonable behaviour. This is particularly likely given that a Government Planning Inspector has fairly recently set out clear views on this issue in the context of the appeal on the main former school site.

#### **4.6. Risk Management**

- 4.6.1 The risks to the Council in terms of potential award of costs are set out above.

### **5. Conclusion**

- 5.1. Officers concur that the desire for the community to gain Victoria Road playing fields for wider public use would be supported in principle. However, in a planning context officers are

mindful that refusal of the Victoria Road application would not serve to enhance local sports provision or community health as desired. In addition, such an approach could be+ an unsound basis upon which to refuse an application and could therefore lead to a cost award against the Council.

## **6. Recommendations**

- 6.1. Executive Board is asked to note that this is an area acknowledged as having a deficiency in sports facilities and pitches. Whilst recognising the role of the Local Planning Authority the Executive Board is recommended to support the principle of enhancing opportunities for the local community to engage in physical activity to improve health and wellbeing in the area.

## **7. Background documents<sup>1</sup>**

- 7.1. None

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<sup>1</sup> The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

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## DEPUTATION THREE – HYDE PARK OLYMPIC LEGACY GROUP

THE LORD MAYOR: Good afternoon and welcome to today's Council meeting. Please now make your speech to Council, which should not be longer than five minutes, and please begin by introducing the people in your deputation.

MR D DAVISON: Hello, Lord Mayor and Members of the Council. My name is John Davison, I am a grassroots football coach, a teaching assistant and a volunteer. I have with me Amit Roy, who is a resident and I suppose a community organiser, Yasmin Ajib, who is a resident and parent of Hyde Park, and Rachael Ryan with young Amir. Adel, Rachael's husband, he is a football coach as well and a colleague of mine, I suppose.

I am going to talk to you about the health of the people of Hyde Park and the need for the local schools and community to access decent sports facilities.

There is great scope for increasing the health of this or any inner city population and I have a got a good idea of how to do it, but first some facts.

Some of you will be aware of the statistic that people living in inner city areas like Hyde Park, Woodhouse, South Headingley and Burley tend to die on average 10 to 12 years younger than their contemporaries in the outer suburbs. There are many reasons for this, but in my experience the quickest and most effective way to remedy a person's poor health is to get them into an exercise habit.

My father, a general practitioner of some 30 years, would agree with me that poor diet, smoking and excess drinking can be curtailed by the fact that aside from cardiovascular benefits, when you are good at a sport it motivates you not mess your body up. As a member of a team you tend to want to improve the facets about yourself that you do not have, and this flows into your general life. You become a more balanced and compassionate person. A person who cares about a sport will tend to avoid such extremes of behaviour that will be damaging to them. You develop a desire to help others, be nice to people, be carefree, and I see this in the people who work in a team or a group around me, or who I have taught.

Five of the primary schools in my immediate area are what I would term seriously deprived in terms of space for participation in competitive sport. Three of them - Quarry Mount, Rosebank and Brudenell Primary - have only access to tarmac playing pitches. These are often shared-use facilities, inaccessible for certain times of the day as PE lessons can clash with other year group's playtimes. Often these playgrounds are on slopes. School halls in primary schools are generally small and are put out of action at key times of the day as they are used as dining areas, and nearby green space can be problematic due to dog mess and litter and one head teacher has even mentioned discarded needles on a field near a school.

Limits such as these conspire to make competitive sport on these areas difficult or dangerous for fear of injury. This does not mean decent athletes cannot be produced in poorer inner city areas (Thierry Henry for example, is the initial product of good free-to-use sports facilities in inner city Paris). A person's environment and influences in their early life can set the habit, or not, to truly excel in terms of



technique, determination and athleticism, and it isn't just about producing Olympians or, for that matter, professional athletes, but just good people.

I can't legally talk about any live planning applications, but I must talk about the plans myself and an organisation that I helped to form had to change this situation for the better and, for that matter support, the agenda that the Government's new Health and Social Care Act legally infers upon you, the local Council — namely to narrow the gap in terms of this health divide.

Let us say that a playing field with an adjoined sports hall (let us say it is the second biggest sports hall in Leeds ) an additional hall area which is currently a swimming pool became available in an inner city area like ours that had previously been offered for free to a community group that could run it. Now, let us think about the model of how this site could operate if it were run as a non-for-profit enterprise by a charitable trust.

I want you to imagine a few things now. A playing pitch which was a hypothetical 90m x 63m could be an official eleven-a-side pitch, with the option of two x seven-a-side football pitches running across it, like the local-use Astro turf pitches in Spain. This meets the requirements laid out by FIFA for these pitch sizes. The use of high netting around the field would stop balls going into neighbouring gardens. The centre circle of the pitch would be interceded by a coir-mat or an artificial turf wicket, and a cricket oval of 60m x 90m (which complies with the governing body's legal requirements) could be put as the border. At least five or six local clubs could share-use these facilities and the primary schools can access them during the day. The requirement of each club that uses them is that they hire the facility for their senior teams on the condition that they are actively promoting their sport within the community, and especially to young people.

I want you to imagine a pyramid feeder system. At the bottom is your under 8s, boys and girls, your under 12s, your under 16's, your development squad and your senior squad. All of this is accessible to anyone who wants to play the sports offered. At the heart of this pyramid is a sphere. That is you. You can enter sport at any level and find a place. Above this are your exit routes (sports scholarships, semi professional clubs) and above that still are professional athletes, your Olympians. You could add to this over 35s, over 40s, playing for fun or playing for fitness. Anyone from the bottom can see the progression to the top and there are at least five different sports here running every week.

To have this beacon site that anyone can access giving encouragement, good technical coaching and a diversity of options to people in the area where it is actually needed. The site can be used by people from other more disadvantaged areas of the city where transport can be set up.

THE LORD MAYOR: Could you make your final point? You have got to the end of your five minutes.

MR J DAVISON: We have set up free after school clubs at this facility between 4.00 to 6.00pm every day, a multi-sports company would do this. This helps address the particularly high rates of type 2 diabetes and cardiovascular



disease in the South Asian population in this area often genetically suffered from and it would help lower the risk of cancer, improve cardiovascular health and improve community cohesion.

My last point is something which is seriously needs to be considered by those who can. If you look at a map of Leeds and pinpoint where the existing sports clubs are.

THE LORD MAYOR: I must ask you - final warning to wind up, please.

MR J DAVISON: OK, sorry. They are generally around the outskirts you do not have a lot in the inner city and in Woodhouse you have got a load of back-to-back houses and someone got stabbed there recently and I saw a guy down there and it was one of my old guys that I was coaching and I wondered maybe something could be done better between planners giving 21 days, it is like a major development which involves of green site loss Between Sport England, which is supposed to be protecting pitches in the inner city showing bias by only transporting them to the outskirts, Education Leeds, defending their position in 2008, saying the provision in primaries is adequate and the new PPG or PPS survey which cannot make any distinction between sports pitches which the public can use and which they can't, planning officers writing reports and omitting certain facts...

THE LORD MAYOR: Thank you for attending.

MR J DAVISON: Doing their jobs adequately – they should be doing better than adequate, we should be looking to try and make things work. *(Applause)*

THE LORD MAYOR: Thank you for attending and for what you have said. You will be kept informed of the consideration which your comments will receive. Good afternoon. *(Applause)* I am sorry, you have completely thrown me off kilter!

COUNCILLOR J LEWIS: I move that the matter be moved to the Executive Board for consideration.

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**EXECUTIVE BOARD**

**THURSDAY, 9TH MAY, 2013**

**PRESENT:** Councillor K Wakefield in the Chair

Councillors J Blake, A Carter, M Dobson,  
S Golton, P Gruen, R Lewis, L Mulherin,  
A Ogilvie and L Yeadon

**HEALTH AND WELLBEING**

**Response to Deputation - Health and Wellbeing of people living in Hyde Park and the need for local Schools and Community to access Sports and Leisure Facilities**

Further to Minute No. 125, 12<sup>th</sup> December 2012, the Director of Public Health and the Chief Planning Officer submitted a joint report responding to the deputation presented to the full Council meeting on 12th September 2012 from the Hyde Park Olympic Legacy Committee regarding the health of people in Hyde Park and the need for local schools and community to access decent sports facilities. This report followed the initial consideration of this matter at the December 2012 Executive Board meeting.

In presenting the report, the Executive Member for Health and Wellbeing requested that the second sentence within paragraph 5.1 of the submitted report be amended, so that it read, 'However, in a planning context officers are mindful that refusal of the Victoria Road application would not automatically serve to enhance local sports provision or community health as desired'.

Responding to a Member's enquiry, officers provided the Member in question with the current position regarding local primary schools' access to local sports facilities, including those referenced by the deputation.

**RESOLVED –**

- (a) That the inclusion of the amendment to paragraph 5.1 of the submitted report (as detailed above) be agreed.
- (b) That it be noted and acknowledged that the area in question has a deficiency in sports facilities and pitches. In addition, whilst recognising the role of the Local Planning Authority, the Board's support be given to the principle of enhancing opportunities for the local community to engage in physical activity in order to improve health and wellbeing in the area.

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**Public Health and Planning**

**1. General Approach to Material Considerations**

- 1.1. The law has always made a clear distinction between the question of whether something is a material consideration and the weight which it should be given. The former is a question of law and the latter is a question of planning judgment, which is entirely a matter for the planning authority. Provided that the planning authority has regard to all material considerations, it is at liberty (provided that it does not lapse into *Wednesbury* irrationality) to give them whatever weight the planning authority thinks fit or no weight at all.
- 1.2. The fact that the law regards something as a material consideration therefore involves no view about the part, if any, which it should play in the decision-making process.
- 1.3. The expression "material considerations" is defined widely. Since March 2012 it has also included the National Planning Policy Framework ("the NPPF") which replaced many of the previous policy statements.

**2. Public Health as a Material Consideration**

- 2.1. Health considerations are capable of being material planning considerations. This is recognised in the NPPF which includes the following statement at paragraph 69:- "*The planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities.*"
- 2.2. Section 12 of the Health and Social Care Act 2012 imposes a duty on local authorities to take appropriate steps to improve the health of the people who live in their areas. Whilst the courts have yet to consider the impact of this new duty in general and in relation to the planning system in particular, there can be no real doubt that it has relevance to planning decision making in that it reinforces the need to consider whether there are health implications associated with planning decisions. Again, once health implications have been identified as material to a planning decision, the weight to be attached to this material consideration is a matter for the decision maker.

**Bob Pritchard**

**Section Head (Development)**

**May 2013**

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