

**MEETING**

**POLICY AND RESOURCES COMMITTEE**

**DATE AND TIME**

**THURSDAY 1ST DECEMBER, 2016**

**AT 7.00 PM**

**VENUE**

**HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BQ**

**TO: MEMBERS OF POLICY AND RESOURCES COMMITTEE (Quorum 3)**

Chairman: Councillor Richard Cornelius  
Vice Chairman: Councillor Daniel Thomas BA (Hons)

Dean Cohen	Alison Moore	Sachin Rajput
Tom Davey	Barry Rawlings	Joan Scannell
Paul Edwards	Alon Or-bach	
Anthony Finn	Ross Houston	

**Substitute Members**

Melvin Cohen	Geof Cooke	Arjun Mittra
Alan Schneiderman	Mark Shooter	Reuben Thompstone

In line with the Constitution's Public Participation and Engagement Rules, requests to submit public questions or comments must be submitted by 10AM on the third working day before the date of the committee meeting. Therefore, the deadline for this meeting is Monday 28 November at 10AM. Requests must be submitted to Kirstin Lambert; 02083592177 [kirstin.lambert@barnet.gov.uk](mailto:kirstin.lambert@barnet.gov.uk)

**You are requested to attend the above meeting for which an agenda is attached.**

**Andrew Charlwood – Head of Governance**

Governance Service contact: Kirstin Lambert; 02083592177 [kirstin.lambert@barnet.gov.uk](mailto:kirstin.lambert@barnet.gov.uk)

Media Relations contact: Sue Cocker 020 8359 7039

**ASSURANCE GROUP**

## ORDER OF BUSINESS

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3.	Declaration of Members' Disclosable Pecuniary interests and Non Pecuniary interests (If any)	
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6.	Members' Items (if any)	
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# Decisions of the Policy and Resources Committee

5 October 2016

Members Present:-

AGENDA ITEM 1

Councillor Richard Cornelius (Chairman)  
Councillor Daniel Thomas (Vice-Chairman)

Councillor Dean Cohen  
Councillor Tom Davey  
Councillor Paul Edwards  
Councillor Anthony Finn  
Councillor Ross Houston  
Councillor Alison Moore  
Councillor Alon Or-Bach  
Councillor Barry Rawlings

Also in attendance

Councillor Reuben Thompstone (as substitute)

Apologies for Absence

Councillor Sachin Rajput  
Councillor Joan Scannell

## 1. MINUTES OF LAST MEETING

**RESOLVED – That the minutes of the meeting held on 1 September 2016 be agreed as a correct record.**

## 2. ABSENCE OF MEMBERS

Apologies for absence were received from Councillor Sachin Rajput and Councillor Joan Scannell who was substituted for by Councillor Reuben Thompstone.

## 3. DECLARATION OF MEMBERS' DISCLOSABLE PECUNIARY INTERESTS AND NON PECUNIARY INTERESTS (IF ANY)

The following interests were declared:

Councillor	Agenda Item	Interest declared
Councillor Ross Houston	Item 11 – Sustainable Design and Construction Residential Design Guidance SPD and Item 12 - ICT Strategy	Non pecuniary interest as Cllr Houston is a Council appointed representative on the Barnet Group Board.
Councillor Alon Or-bach	Item 12 - ICT Strategy	Non pecuniary interest as Cllr Or-bach is an employee of Samsung, a partner of the council's new IT assurance partner.

**4. REPORT OF THE MONITORING OFFICER (IF ANY)**

There was none.

**5. PUBLIC QUESTIONS AND COMMENTS (IF ANY)**

There were none.

**6. MEMBERS' ITEMS (IF ANY)**

There were none.

**7. MONITORING THE IMPACT OF BREXIT ON BARNET**

The Committee considered the report.

**RESOLVED –**

- 1. That the Committee agree the suggested set of indicators to be monitored, as set out in Tables 1 and 2 of this report.**
- 2. That the Committee agree to receive six-monthly updates based on the suggested indicators, together with accompanying comments from officers and a view from local strategic partners.**

**8. BUSINESS PLANNING 2017-20 - EFFICIENCY PLAN**

The Committee considered the report.

It was noted there was a typographical error on the first line of paragraph 1.1.4, and that 'an' should read 'to'.

**RESOLVED – That the Committee approves the 'Efficiency Plan' for submission to the Department for Communities and Local Government (DCLG) in order to secure a minimum funding guarantee.**

**9. BUSINESS PLANNING UPDATE 2016-17**

The Committee noted the report.

It was noted there were typographical errors in recommendation two. It was noted that the word 'approved' and that the words 'and deletions' should be deleted from the recommendation, as there were no deletions in this instance. This was duly agreed.

**RESOLVED – That the Committee**

- 1. Approve the budget virements as set out in sections 1.2 & 1.3**
- 2. Approve the additions to the capital programme and the funding changes as shown in paragraph 1.4**

## **10. CUSTOMER TRANSFORMATION PROGRAMME**

The Committee considered the report.

With respect to recommendation four, Councillor Rawlings requested that there be consideration at a future Constitution, Ethics and Probity Committee meeting of the practice of some decisions being delegated to an officer in consultation with the Chairman, with no reference to opposition members of the committee. This was duly agreed.

A separate vote was taken on recommendation four.

On recommendations one to three being put to the vote, the recommendations were unanimously declared carried.

On recommendation four being put to the vote, the Committee voted:

For: 6

Against: 5

Abstain: 0

Recommendation four was declared carried.

### **RESOLVED – That the Committee**

- 1. Approves the vision for the future of customer services in Barnet (section 1.2 to 1.6), as agreed on 28 June 2016 as part of the Customer Access Strategy.**
- 2. Approves the Customer Transformation Programme Business Case (Appendix A), which sets out the proposed approach. Agrees the capital addition of £1.5m to the capital programme for 2016/17 to deliver Phase 1 of the programme as set out in paragraph 9.2. Notes the overall anticipated costs of £5.4m over a two-year period to deliver this vision. The capital requirements for the balance of the funding required in future years will be considered as part of the Council's capital investment programme within the Council's Medium Term Financial Strategy which will be brought back to this Committee at a future date for approval based on the successful delivery of Phase 1.**
- 3. Approves the Chief Operating Officer to commission the council's contracted IT assurance partner to scrutinise the technical aspects of the programme before funding is released or contracts are signed.**
- 4. Delegates authority to the Chief Operating Officer, in consultation with the Chairman of the P&R Committee, to agree an appropriate delivery plan and to enter into contracts to deliver this work with payment based on successful delivery against milestones.**

## **11. SUSTAINABLE DESIGN AND CONSTRUCTION AND RESIDENTIAL DESIGN GUIDANCE SUPPLEMENTARY PLANNING DOCUMENTS**

The Committee considered the report.

The Commissioning Director for Growth and Development noted there was a typographical error on the front page of the report, and that the report should be in the name of Cath Shaw, Commissioning Director for Growth and Development.

**RESOLVED –**

1. That the Committee note the responses in the Consultation Report for the proposed Sustainable Design and Construction Supplementary Planning Document attached at Appendix 1.
2. That the proposed Sustainable Design and Construction Supplementary Planning Document attached at Appendix 2 is approved for adoption for use as guidance for planning applications.
3. That the Committee note the responses in the Consultation Report for the proposed Residential Design Guidance Supplementary Planning Document attached at Appendix 3.
4. That the proposed Residential Design Guidance Supplementary Planning Document attached at Appendix 4 is approved for adoption for use as guidance for planning applications.

**12. ICT STRATEGY**

The Committee considered the report.

**RESOLVED – That the Committee considers the council’s ICT Strategy and notes that business cases to deliver the strategy will be presented to Committee for approval**

**13. COMMITTEE FORWARD WORK PROGRAMME**

The Committee noted the work programme.

**14. ANY OTHER ITEM(S) THE CHAIRMAN DECIDES ARE URGENT**

There were none.

The meeting finished at 8.54 pm



## Policy and Resources Committee

1<sup>st</sup> December 2016

<b>Title</b>	<b>Barnet Copthall Leisure Centre: Diving Feasibility</b>
<b>Report of</b>	Commissioning Director, Adults and Health
<b>Wards</b>	All Wards
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	Yes
<b>Enclosures</b>	Appendix 1 – Diving Feasibility Study Report
<b>Officer Contact Details</b>	Cassie Bridger, Sport & Physical Activity: Strategic Lead <a href="mailto:Cassie.Bridger@barnet.gov.uk">Cassie.Bridger@barnet.gov.uk</a> Rebecca Jakob, Sport & Physical Activity: Project Manager <a href="mailto:Rebecca.Jakob@barnet.gov.uk">Rebecca.Jakob@barnet.gov.uk</a>

### Summary

On the 1<sup>st</sup> September 2016, Policy and Resources Committee resolved to review the feasibility of including diving within the core facilities mix of the proposed new Barnet Copthall Leisure Centre. This paper sets out the results of the feasibility study and supporting evidence. The Policy and Resources Committee asked officers to identify:

- The additional capital costs of including diving
- The impact of including diving on revenue costs and income.
- The participation numbers for diving and other aquatic activities.
- Planning implications of the inclusion of diving.

The feasibility study considered two options to include diving in detail. Both have been assessed against the elements above. The total financial impact of including diving, depending on the options assessed, is £6.03m or £10.01m respectively.

The feasibility study shows that there are between 132- 140 participants in total who participate in diving or synchronised swimming activity per week. The numbers participating in swimming are per week are approximately; 3,511 (this does not include casual swimmers, which would increase this number). The inclusion of diving in the community pool would displace approximately 332 individual swimming participants per week and/or 16,603 swimming visits per

year.

Initial planning advice suggests that neither Option 1 nor Option 2 would have any significant impact on the final decision made by Planning Committee.

The feasibility study shows that both options presented in this report to include a diving facility at a redeveloped Barnet Copthall Leisure Centre are unaffordable. The financial evaluation is based on the additional capital cost required which leads to borrowing costs becoming unaffordable and has a negative impact on the overall revenue position.

This report therefore recommends that the core facilities mix for the proposed Barnet Copthall Leisure Centre remains as agreed in December 2015.

## Recommendations

### That the Policy and Resources Committee:

1. **Note the additional capital costs required to include a diving facility at Barnet Copthall Leisure Centre.**
2. **Note the negative revenue impact of including a diving facility at Barnet Copthall Leisure Centre.**
3. **Note the impact on swimming participation of the Option 1 diving facility at Barnet Copthall Leisure Centre.**
4. **Note the cost per head of the Option 2 diving facility at Barnet Copthall Leisure Centre.**
5. **Note the associated risks of including a diving facility at Barnet Copthall Leisure Centre.**
6. **Agrees that the core facilities mix for the proposed Barnet Copthall Leisure Centre remains as agreed in December 2015**

### 1. WHY THIS REPORT IS NEEDED

- 1.1 In February 2015, the Policy and Resources Committee approved a Revised Outline Business Case (ROBC) setting out recommendations for re-providing the Church Farm and Barnet Copthall Leisure centres through a design and build process.
- 1.2 Following a period of resident consultation in 2015 and the completion of health and equalities impact assessments, a further report was presented to Policy and Resources Committee on 15th December 2015 outlining a core facilities mix for the proposed leisure centre schemes (set out in para 2.1 below). This core facility mix, which excluded diving, was approved unanimously, along with the approval of Victoria Recreation Ground as the selected location to replace the existing Church Farm Leisure Centre.
- 1.3 In August 2016 the Council received a petition, entitled '#SaveBarnetDiving' which requested that the Council reverse the decision to exclude diving from the core facilities mix at Barnet Copthall Leisure Centre. At the time of submitting the petition to the Council,

#SaveBarnetDiving had gained approximately 2,161 signatures, of which approximately 55% were Barnet residents.

- 1.4 It is expected that a petition will be submitted to the Council with over 7,000 signatures. In this event the petition will be reported to the next Full Council meeting on 13 December 2016 if submitted. All Members of the Council will therefore be requested to consider the petition.
- 1.5 At Policy and Resources Committee on 1st September 2016, the Committee considered the #SaveBarnetDiving petition, along with a member's item on diving in the name of Councillor Alison Moore. The Committee resolved that a further report be brought back for consideration, which considered the feasibility of including diving in the new Barnet Copthall Leisure Centre.
- 1.6 The Committee resolved that the potential for the inclusion of diving be reassessed but without delay to the existing construction project (as set out in the minutes of the meeting of December 2015)
- 1.7 Policy and Resources Committee asked that feasibility study addressed::
  - The numbers participating in diving
  - The costs of including diving, both in capital and revenue terms
  - The impact on swimming participation
  - Planning implications of including
- 1.8 The findings of the feasibility study have been determined by participant numbers, capital costs, revenue position (including operational expenditure), leisure management income and future contract position, planning guidance, total programme cost and timescales for construction.

## **2. REASONS FOR RECOMMENDATIONS**

### **Barnet Copthall Core Facilities Mix**

- 2.1 In December 2015 Policy and Resources Committee approved the core facilities mix for a proposed redeveloped Barnet Copthall Leisure Centre; as set out below.
  - 25m, 8 lane, regional short course swimming pool (static floor) with spectator viewing area and poolside competitor seating
  - 25m, 6 lane, community swimming pool (static floor) with poolside spectator seating
  - 13m x 8m learner swimming pool (static floor)
  - Village change
  - Café
  - Fitness suite
  - Flexible studio space
  - Dedicated dry fitness change

- Managers office / timing room
  - Pool store, staff accommodation, admin space and plant room
- 2.2 The approved core facilities mix was developed considering a number of aspects including the feasibility study (2015), public consultation; a research and needs assessment; engagement with National Governing Bodies.
- 2.3 A diving facility was not recommended as part of the approved core facilities mix (Dec 2015) as conclusions suggested that the inclusion of diving would result in a less affordable scheme, with increased capital costs and an overall impact on the revenue position.
- 2.4 The current pool configuration at Barnet Copthall Leisure Centre is two 25m pools and a multi-activity pool, which is used for diving, synchronised swimming, aqua aerobics and water tots. The latter two activities can be accommodated within the new proposal for Barnet Copthall.

### **Diving Feasibility Study**

- 2.5 A diving feasibility study was undertaken throughout October and November 2016, co-ordinated by Council officers, and including architects, surveyors, cost consultants, and sport and physical activity analysts specialising in costs and income. This included design, verification of numbers and participation levels for diving and the impact of including a diving facility at Barnet Copthall Leisure Centre.
- 2.6 The design approach modelled two options to include diving:
- To incorporate a diving facility within the main community pool
  - To include a separate purpose built diving pool and hall.
- 2.7 The feasibility study includes:
- Confirmation of participation, capacity, and weekly programme hours for swimming, diving and synchronised swimming at the existing Centre.
  - Impact on participation in swimming if diving were included.
  - Confirmation of the income and expenditure attributable to swimming, diving and synchronised swimming at the existing Barnet Copthall Leisure Centre.
  - Analysis of the financial impact of including diving on the current business case, capital programme, revenue costs and future contract, based on both options.

- Confirmation of details of the current operator booking system and promotion of diving at the existing Barnet Copthall Leisure Centre.
- Investigation into potential funding sources for diving provision.

2.8 In developing the design, meetings were co-ordinated with a number of stakeholders to determine, for both options: the estimated capital costs, impact on the revenue position (including operational expenditure), and verification of associated participants, a leisure management fee and future contract position, planning guidance, total programme cost and timescales for delivery.

2.9 The table below presents a summary of the headline information in the Diving Feasibility Summary Report.

2.10 **Table 1**

	<b>Agreed facilities mix and design at RIBA Stage 3</b>	<b>Diving – Option 1</b>	<b>Diving - Option 2</b>
<b>Additional capital cost required (one-off cost)</b>	N/A	£2,428,000	£4,517,000
<b>Barnet Copthall Leisure Centre total capital cost</b>	£22,540,000	£24,968,000	£27,057,000
<b>Total lost revenue (management fee from leisure contract over the borrowing / modelling period (30 years))</b>	N/A	£3,600,000	£5,490,000
<b>Total capital + revenue impact</b>	N/A	£6,028,000	£10,007,000
<b>Affordability of prudential borrowing</b>	Affordable	Not affordable	Not affordable
<b>Projected annual participation throughput (total number of attendances) at redeveloped Barnet Copthall</b>	624,629	608,046	641,597
<b>Projected annual aquatics throughput (total number of attendances) at Barnet Copthall</b>	255,512	238,908	272,459
<b>Numbers of swimmers / attendances displaced per week / year</b>	n/a	332 swimmers displaced per week 16,603 swimming visits displaced per year	n/a
<b>Number of divers and synchronised swimmers</b>	132	132	260
<b>Cost (capital + revenue impact) per current diver/synchronised swimmer*</b>	n/a	£45,667	£75,810

\*figure is based on approximate annual average total of 132 participants (total for diving and synchronised swimming)

- 2.11 The feasibility study included communication with Sport England and the Amateur Swimming Association (ASA) and engagement with Greenwich Leisure Limited (GLL) as the current leisure management operator, Barnet Copthall Swimming Club and the #SaveBarnetDiving petition group, including a meeting with each group.
- 2.12 Further engagement with the London Borough of Waltham Forest and the London Borough of Merton was also undertaken to explore the respective approaches to accommodating diving within newly developed Borough facilities.

### **Barnet Copthall: Aquatics Programme**

- 2.13 The Sport and Physical Activity Needs Assessment Report (2012), Sport England Facility Planning Model (2015) and demand analysis indicated that there was a need as a minimum to maintain the current level of swimming provision at Barnet Copthall Leisure Centre, particularly given the projected population growth. It was noted that the pools at the current Barnet Copthall Leisure Centre are already uncomfortably busy.
- 2.14 Maximising participation in sport and physical activity and reducing inactivity among Barnet residents is a key priority for the Council, as agreed in the Adults and Safeguarding Committee's commissioning plan and Council corporate priorities. Sport England's Active People Data shows that 50.1% of the Barnet population do not currently participate in sport weekly (APS 9). Maintaining and increasing swimming provision provides a key opportunity for all residents to participate in physical activity, across the spectrum of age and abilities.
- 2.15 As referenced in the Policy and Resources Committee Report in December 2015, the swimming programme at Barnet Copthall is a large and successful one. There is an average throughput (total number of attendances) of 400,000 visits to the Centre each year, with over 312,000 attendances in 2015 attributed to the aquatics programme.
- 2.16 The swimming programme at Barnet Copthall includes casual swimming, school swimming, GLL learn to swim lessons, Barnet Copthall Swimming Club swimming usage and GLL run swim fit classes. Additional hours are delivered for other activities, such as public diving sessions (c. 1hr per week) and the sub-aqua club (c. 1hr per week). The programme contains opportunities for all ages and abilities to participate in water based provision of swimming, although it should be noted that analysis has shown that demand is increasing. The aim for the future design is to maximise and increase participation.
- 2.17 The predominant use of the programme (including peak usage) at Barnet Copthall is currently casual swimming (35%), swimming lessons (including schools, 33%) and BCSC usage (18%). All of the current programme, apart from diving and synchronised swimming can be accommodated in the agreed core facilities mix. Data for the first half of this year (January –

June 2016) is presented in the table below. Swimming accounts for over 150,000 attendances in this six month period.

**2.18 Table 2: Throughput and Participant Numbers (Swimming / Diving)**

Area	Throughput (total attendances)	Individuals
GLL Learn to Swim lessons	24,202	1,362 enrolled
School Swimming	38,070	1,599 enrolled
BCSC Swimming Squad	51,260	550 members
Casual Swimming	32,829	Participants could include all or some of current members, pay and play members and non-members
Tom Daley Academy (GLL Learn to Dive lessons)	1,575	63 enrolled
BCSC Diving Squad	2,250	34 enrolled
Public diving	306	Not comparable – average of 12 per week

2.19 Participant numbers and usage figures in relation to the diving/ multi activity pool at Barnet Cophall were provided by Greenwich Leisure Limited (GLL), Barnet Cophall Swimming Club and the campaign, #SaveBarnetDiving. In addition, GLL staff took manual counts of participants in public diving sessions over a 6 week period, and this was also factored in alongside the GLL system data. The evidence provided by all parties was very similar with no significant discrepancy between information provided by the three separate sources. The data was combined into the table above. The data shows diving accounts for a small proportion of overall aquatic usage, at 6%,

2.20 The table below shows participant numbers for diving and synchronised swimming which currently take place in the diving/multi activity pool. This pool is also used for swimming lessons, water workout sessions and toddler swimming sessions, all of which can be accommodated within the agreed facilities mix for the new centre.

**2.21 Table 3: Diving & Synchro Participant Numbers – Diving/ Multi Activity Pool**

Programme area	Annual Average Participant Total	Noting Information
Public Diving	Approx. 12 participants (average per session)	Data combined from GLL hard copy tally and booking system for each public diving session was taken for 6 weeks; from 10th September 2016 – 15th October 2016. The figure was taken at the midpoint during the hour session. The maximum capacity during this session is 35 individuals.

Tom Daley Diving (GLL Learn to Dive lessons)	Approximately 63 individuals in lessons.	Tom Daley Diving is a partnership brand with GLL which is part of the organisation's nationwide programme.  Maximum capacity is estimated at 80-100.
Barnet Copthall Swimming Club: Diving Squad	Approx. 28 members (annual average)	Current live membership is 34 members (Oct 2016).  This can fluctuate +/- per annum as participants progress from lessons.  Approximately 20 Barnet residents are diving squad members.
Barnet Copthall Swimming Club: Synchronised Swimming Squad	Approx. 19 members (annual average)	Current live membership is 22 members (Oct 2016).  Approximately 11 Barnet residents are synchronised swimming squad members.
GLL Synchronised Swimming: Lessons	Approximately 10 individuals in lessons.	10 participants enrolled in lessons. Lessons are delivered by GLL.
Approximate Total Participants	<b>Annual Average Total; 132 participants</b> (103 diving, 29 synchronised swimming)	<b>Total 141 participants</b> (109 diving, 32 synchronised swimming) Figure includes average number for public diving and current live total for lessons. It is not possible to identify any overlap in individuals.

2.22 The figures in the above table show that there are approximately an annual average of 103 participants who take part in diving and 29 who take part in synchronised swimming at Barnet Copthall Leisure Centre per year through lessons/squad activity. However, there is likely to be a crossover of participants that attend public and lesson/squad based diving activity and therefore some duplication of individual participants in the public session numbers.

2.23 These numbers, when compared to the large scale swimming numbers in paragraph 2.14, show that the greatest opportunity to increase participation and sustain revenue income derives from swimming lessons and BCSC swimming which provide the 76% of current aquatics programme income. This is vital to the affordability of the new build centre and can be enhanced within the current proposed facility mix (Dec 2015).

2.24 The income figures show that diving is significantly subsidised. Diving and synchronised swimming activity (lessons and club) accounts for 6% of the total aquatics programme income. The cost of delivery as a % of income equals 20% for Tom Daley GLL diving lessons

2.25 Based on the data collated, including diving within the core facilities mix would place pressure on the ability to significantly increase participant numbers and ensure that a sustainable financial position can be achieved.

## Design Development – Diving Options

- 2.26 The design aspect of feasibility study included the full assessment of two options (Appendix 1: Option 1 and Option 2) which accommodate the inclusion of a diving facility at Barnet Copthall Leisure Centre. Both options developed include the current diving board heights of 3x1m boards, 1x3m board, 1x5m board and 1x0.5m board.
- 2.27 Two other options were considered but not progressed for technical and practical reasons. The inclusion of a diving facility within the 'learner pool' was discounted as it would require a complete redesign of the new leisure centre (i.e. starting the RIBA process again from the beginning). A complete redesign would be required to accommodate programme flexibility, required standards for diving, policy guidelines and. changes to the building infrastructure, as the fitness suite is located on the first floor of the proposed facility at RIBA stage 3 and does not permit the building height required.
- 2.28 An option to include diving in the 'competition pool' was also not progressed as it would further decrease the ability to provide swimming lessons, casual swimming, competitive swimming and galas. Including diving within this pool would limit opportunities to maximise swimming participation for the wider population of Barnet. Moreover, the creation of a moveable boom across the 'competition pool' for operational flexibility would increase capital costs and result in reduced participation and income.
- 2.29 The final options, 1 and 2 were developed based on RIBA Stage 3 design information and include amendments to the design detail in incorporate the full adjustments required. This included:
- Assessment of the impact to landscape proposals
  - Mechanical and Electrical Plant Developed design report
  - Structural Engineering survey

### Diving Option 1

- 2.30 Option 1 explored the potential to include diving provision within the 'community pool' in the existing proposed design. This option requires an increased building footprint to enable the necessary increased pool surrounds. Although the total water area remains unchanged from the proposed RIBA stage 3 design, the following additional amendments would be essential to accommodate diving provision:
- Increased pool size to permit moveable floor for programming requirements.
  - A moveable pool floor to allow the required pool depth and to separate the diving area from the rest of the community pool when in use.

- Increased depth of pool tank (3.8m depth required for a 5m diving platform).
  - Infrastructure for diving boards and platforms.
  - Additional diving equipment.
  - Change to roof to support increased height required.
  - Increased services to support additional roof height and additional pool hall.
- 2.31 In this option, diving and synchronised swimming would displace swimming usage during the peak hours of operation, as the community pool cannot be used for other activities while deep water activity is taking place. The inclusion of diving provision in this pool would have a significant impact on operational use. When the diving boards were in use, it would decrease swimming lane numbers, with a resultant impact on offering a varied swimming programme (e.g. public swimming, inclusive disability sessions, and gender specific sessions) and meet current and future demand.
- 2.32 This option would reduce swimming numbers as a significant proportion of programming is lost. It also places a risk on securing of potential external investment which would require an increase in participant numbers.
- 2.33 This option would cost £2.4m capital to build and also reduces the operator's ability to generate sustained income. Reduced programme flexibility restricts the ability to increase levels of attendance and increases operational expenditure. This option would reduce overall revenue income by c£120,000 less per annum, in terms of an annual management fee paid to the Authority. This has a potential impact of c£3.6 million lost over the modelling period (30 years). This is a cautious estimate given it is based on mid-range (not optimum) estimates for revenue and does not take into account any potential further lost revenue after expiry of a new leisure management contract.
- 2.34 In summary, this option jeopardises the overall affordability of the proposed scheme, would result in a decrease in swimming attendances and increase operational expenditure.

## **Diving Option 2**

- 2.35 Option 2 explored the potential to include a separate diving pool (17m x 13m) located to the north of the 'competition pool'. This approach would accommodate existing diving and synchronised swimming provision and create increased capacity.
- 2.36 This option results in a significant increase of water area and an enlarged building footprint of approximately 19%. This is due to necessary changes in operational requirements and the following amendments:
- A moveable pool floor to allow the required pool depth dependant on programmed activity.

- Increased village change area to accommodate additional pool hall.
- Additional spectator viewing to accommodate pool hall.
- Additional plant space required to support additional pool hall.
- Additional infrastructure changes to support increased footprint of building.
- Changes to the façade to reflect amended design.
- Additional services to support provision of new diving pool and increased plant area.
- Additional diving equipment.

2.37 The significantly increased building footprint means that certain construction and operating expenditure items are increased proportionally. The increased building footprint has a negative impact on the ability to adequately re-site the current sports pitches and run off areas at Barnet Copthall, so this option could reduce sports activity levels on the wider site. This option would increase attendances at the centre by 17,000 per annum (which incorporates all the uses of a multi-activity pool).

2.38 This option would increase operating costs through increased utility consumption, extra lifecycle costs for repairs and maintenance and increased staffing costs to manage extra pool space. This option has a significant negative impact on the financial modelling of the proposed scheme and the ability to generate sustained income.

2.39 This option would cost £4.5m capital to build. This option reduces income by c£183,000 per annum, in terms of an annual management fee paid to the Authority. This has a potential impact of c£5.49 million lost over the modelling period (30 years). This is a cautious estimate given it is based on mid-range (not optimum) estimates for revenue and does not take into account any potential further lost revenue after expiry of a new leisure management contract.

2.40 In summary, this option makes the new Barnet Copthall Leisure Centre building unaffordable, would increase operational expenditure and reduce revenue income. Whilst does not reduce swimming attendances, it would increase the costs of the scheme by £10.01m.

2.41 Both the design options developed present a significant affordability risk to the Council and are estimated to have a negative financial impact on the business plan for the new Centre.

## **Planning Guidance**

2.42 In both of the options, the massing of the building has changed from 6.5m to 8.5m high, to accommodate an increased ceiling height above the diving boards.

2.43 Subject to further development of any future amendment to the current design, or a separate application to incorporate either Option 1 or 2 into

the scheme, initial planning advice has suggested this will not have any significant impact on the final decision made. However, the potential inclusion of a diving facility and amendments would require a re-submission of proposals to the planning authority which would include an additional cost.

- 2.44 On the 19th September 2016 the applications for the proposed developments were submitted to planning, and include commentary relating to the potential inclusion of diving subject to a feasibility study and committee approval.

## Capital Costs

- 2.45 The inclusion of diving in the original Feasibility Study (Policy and Resources February 2015) was estimated to increase capital costs of the total scheme by £675,920. This approximate cost was indicative at a point in time and prior to the start of the formal RIBA stage design process, to inform the development of an affordable facility mix. The cost of incorporating diving into the current Barnet Copthall design is now significantly greater than the original estimate. This is to be expected, as the costs are based on designs that are now at RIBA Stage 3.
- 2.46 The capital cost envelope for the scheme agreed by Policy and Resources Committee in 2015 was a range between £18,000,000 - £35,000,000. At RIBA Stage 3 the core cost for the proposed schemes has increased to the top end of the range set, i.e. £35m. Final cost certainty is reached at the end of RIBA Stage 4. At this stage, an increase in the capital cost would risk the entire scheme becoming unaffordable and over the budget range previously agreed by Policy and Resources Committee.
- 2.47 It is worth noting that the capital costs indicated in Appendix 1: Option 1 and 2 do not account for any additional costs that may occur due to the need to continue to operate the existing centres for a longer period of time. These costs would incur if the decision was taken to include diving as this would result in the elongation of the development, planning and construction programme for the new centre.
- 2.48 The table below shows the capital cost increase of including diving at the redeveloped Barnet Copthall Leisure Centre, at RIBA Stage 3.

2.49 **Table 4: Capital Cost Estimates**

	<b>New Barnet Copthall Centre RIBA Stage 3 Estimate</b>	<b>Diving - Option1</b>	<b>Diving - Option 2</b>
<b>Capital cost of including diving facility</b>	N/A	+ £2,428,000	+ £4,517,000
<b>Estimated Total: Barnet Copthall Leisure Centre</b>	£22,540,000	£24,968,000	£27,057,000
<b>Increased revenue required</b>	N/A	£132,000	£246,000

<b>per annum to repay borrowing</b>			
<b>Total capital + revenue impact over 30 years</b>	N/A	£6,028,000	£10,007,000
<b>Affordability (3.5% - 30 years)</b>	Affordable	Not Affordable	Not Affordable

2.50 Cost certainty for the proposed overall scheme will not be achieved until RIBA Stage 4 (planned January 2017). In terms of overall affordability both of the schemes not only reduce the revenue income to the Council from the operator, but also bring an increased capital requirement.

2.51 It is therefore concluded that the inclusion of diving would make the proposed scheme less viable, as the increased capital, operational and programme costs would have an adverse effect on the overall affordability of the new leisure centre construction which would be managed through prudential borrowing.

### **Associated Programme Risks**

2.52 In addition to the financial risk of including diving and the impact on swimming participation in Option 1, the following risks would also occur if diving were to be included: :

- 6 weeks minimum elongation of the design programme due to design amendments, with additional design costs incurred.
- Delayed opening of new centre.
- Increased construction costs, subject to inflation and due to revised timescales.
- Programme delay whilst a new planning application is amended and prepared.
- Longer construction period, affecting the future leisure management contract income.
- Adverse impact on Barnet Copthall sports pitches and relocation review in Option 2.

### **External Funding Opportunities**

2.53 The capital cost and affordability implications outlined within this report indicate that the potential inclusion of diving would be reliant upon external financial support. The diving feasibility summary report (Appendix 1) references available funding opportunities which are substantially limited.

2.54 The diving feasibility summary report (Appendix 1) has not identified any capital funding schemes that are directed specifically at diving clubs aligned to the total costs required. The two relevant national governing bodies, the Amateur Swimming Association and British Diving do not offer any diving funding of this nature on a club basis. There are other funding bodies such as the London Marathon Trust; however, they only fund up to £150,000 as a maximum.

- 2.55 Sport England currently funds capital schemes through their Strategic Facilities Investment Fund, with a maximum allocation of £2m for any application. Barnet Council has already submitted an expression of interest to Sport England in May 2016 for the two new proposed leisure centres and agreed facilities mix, and this funding is already included in the affordability modelling within this report. There is no other opportunity to seek additional Sport England funding for this scheme.

### **Developing competitive & elite divers**

- 2.56 The Tom Daley Diving Academy is the GLL Learn to Dive programme, branded in partnership with Olympic Medallist Diver Tom Daley. The programme is designed for all ages and abilities seeking to take up diving.
- 2.57 The Academy's hub is at the London Aquatics Centre, but the lesson programme extends across GLL contracts nationwide. The courses are available in 2 formats: a rolling programme that allows customers to join at any stage and progress at their own pace, attending one lesson a week; and intensive courses.
- 2.58 GLL coaches in the Tom Daley Academy are suitably qualified diving coaches, and do signpost individuals into competitive clubs. Within Barnet, this currently operates at a local level whereby participants who have the ambition and ability are signposted to the Barnet Copthall Swimming Club (BCSC) Diving Squad of which there are currently 34 members (an annual average is 28).
- 2.59 The BCSC diving squad is divided into three groups: junior, intermediate and senior. All sections of the squad are offered the opportunity to progress through development stages.
- 2.60 The majority of BCSC diving squad members currently participate in skill based competition at 1m and 3m heights, which is an introduction to diving competition within the British Diving pathway. There are no Great Britain Junior Elite divers in the Barnet Copthall Swimming Club diving squad.
- 2.61 Importantly, training sessions for divers at elite competitive level will often be split. Fifty per cent of their time will be spent on dry based technical and physical preparatory work and 50% on water based activity, developing dives. Barnet Copthall does not have the dry side space to enable the dry side requirements. Without an extensive 'dry side' space (e.g. sports hall with dry diving boards, crash mats, trampolines, wall bars and storage space) the ability to operate competitive diving and training is limited. Participants who have the ability to progress into elite diving training would need to train in a centre with dry side facilities.
- 2.62 This was endorsed during a meeting with members of the Barnet Copthall Swimming Club Committee in October 2016 who referenced members that train at other local authority facilities in order to develop their potential. This is also dependant on the number of coaching staff trained, qualified and available to support an extensive diving programme, which is limited.

Current regional facilities with a 5m + platform and the ability to support a competitive/elite pathway for Barnet residents include the London Aquatics Centre (Olympic Park), Crystal Palace National Sports Centre and Luton Sports Village.

### **Promotion of Diving**

- 2.63 At the September 2015 Policy and Resources Committee meeting, #SaveBarnetDiving suggested that there is a waiting list for lessons at the Tom Daley Academy, which was suggested as being between 18-30 individuals. This has been checked with GLL, which has confirmed that there was no current waiting list, although it is now possible to join one. However, Junior Dive Beginner sessions are full to capacity.
- 2.64 It was also noted by #SaveBarnetDiving that there can be difficulties with booking diving lessons as they are not currently advertised through the website. This review showed that the online booking portal is not simple to find through the GLL Barnet Copthall website and people may be directed to contact the Centre directly, at which point it is possible to book lessons directly. Alternatively, once the online booking portal is located, lessons and their availability are clearly shown. It is not possible to join a waiting list online although this is now possible directly through the Centre.
- 2.65 During 2016 there are expected to be 19 diving pool sessions closed in total due to swimming galas. During galas the diving pool is used by competitive swimmers for essential warm ups. GLL provides all leisure centre users with a minimum of two weeks' notice of planned closures via web alert and information displayed within the centre.
- 2.66 Operational improvements which related to both the promotion and booking system for diving lessons have been raised with GLL, which include a future review in relation to the management and programming of public diving sessions. However commercial analysis has presented that this would not materially impact the financial viability of diving and generate the wide inclusive reach of swimming and other programmed activity.

### **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1. Options to develop designs to include diving in the learner pool and competition pool have both been discounted for reasons above.

#### 4. POST DECISION IMPLEMENTATION

- 4.1. Pending the approval of Policy and Resources Committee. The project will continue to commence towards the key milestones detailed below in 5.2.

#### 5. IMPLICATIONS OF DECISION

- 5.1. Subject to the recommendations within this report and planning approval, it is anticipated that construction will commence in early 2017. The proposed new leisure facilities are projected to open by March 2019. The existing Barnet Copthall Leisure Centre will remain operational until a new facility is complete.
- 5.2. An anticipated planning decision is likely to be reported at Planning Committee on 15<sup>th</sup> December 2016. Subject to future approval and consent, Council officers will work in partnership with Barnet Copthall Swimming Club and the Council's leisure operator to review signposting to diving opportunities within the region.

Date	Key milestone
19 <sup>th</sup> September 2016	Submission of Planning Application
14 <sup>th</sup> October 2016	Appointment of construction partner RIBA Stage 4 (Technical Design) commences
15 <sup>th</sup> December 2016	Anticipated Planning Committee
Feb – March 2017	Anticipated construction start, subject to planning consent.
September 2017	Leisure Management Contract Award
1 <sup>st</sup> January 2018	New leisure management contract commences
Early 2019	Anticipated opening of proposed new facilities

#### Corporate Priorities and Performance

- 5.3. The Corporate Plan 2015-20 sets out the following strategic objectives in ensuring that Barnet is a place:-
- Of opportunity, where people can further their quality of life.  
The proposed re-provision of the Council's leisure facilities will create destinations which integrate sport and physical activity with open spaces which people will want to go to.
  - Where people are helped to help themselves, recognising that

prevention is better than cure.

The new leisure management contract with a focus on sports development and public health measures will encourage people in Barnet to keep fit and active and therefore support their wellbeing as well as contribute to addressing issues such as social isolation.

- Where services are delivered efficiently to get value for money for the taxpayer.

The proposed re-provision of the Council's leisure estate will provide facilities and services that residents will continue to value and that meet their needs whilst remaining affordable.

- 5.4. The project will directly support the Joint Health and Wellbeing Strategy for Barnet 2015 – 2020 and its commitment to increase wellbeing through participation in sport and physical activity across the borough.

## **Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

### **Capital cost estimates**

- 5.5. The feasibility study commissioned during the previous project phase suggested a best cost estimate for the two proposed new centres. Due to the high level nature of this estimate, and the volatility of the construction market, the study included a range of costs that the final construction could fall into. At Policy and Resources Committee in February 2015, the Committee approved a cost range from £18m to £35m. An additional capital bid to support the maximum scheme value has been included within the Business Planning – Medium Term Financial Strategy 2017/20 and draft budget for 2017/18. The full scheme value has been factored into the business case and financial modelling to determine the overall affordability. The inclusion of diving has been found to be unaffordable based on projected future income and the additional capital.
- 5.6. As part of a developed design, more detailed investigation into the sites and the functionality of buildings has been considered, the current predicted cost range at RIBA Stage 3 for Barnet Copthall Leisure Centre is £22,540,000.
- 5.7. Both options (1 and 2) considered as part of the diving feasibility study increase the capital cost estimates above the approved maximum cost range of £35m. Further details are included at 2.10 (Table 1) and 2.44-2.50 (Capital Costs).
- 5.8. The Revised Outline Business Case took the capital cost estimates and income predictions from the feasibility study (2015) and showed that, with CIL money, and prudential borrowing funded from income predictions, the Council could afford to build the two proposed leisure centres. The current financial modelling indicates that any further increase above the capital costs (at RIBA 3) cannot be offset by income as the mid to optimum projections have already

been utilised.

### **Leisure Management Contract**

- 5.9. The feasibility study estimated the potential income for each of the Council's five leisure centres and calculated the likely cost of running the individual facilities to create a model of the total average annual income that the Council could reasonably expect from the whole leisure estate.
- 5.10. The leisure management procurement is critical to delivering guaranteed an annual income as part of a new leisure management contract. A new contract will take effect from January 2018 and assume the management and operation of Barnet leisure facilities.
- 5.11. The procurement process to deliver a new leisure management contract commenced in October 2016, with an anticipated contract recommendation and award by September 2017. Any fundamental changes to the proposed schemes risk the projected annual income and business plan deliverability of the leisure estate. Any subsequent changes to include a diving facility could possibly require re-start of the procurement process and would require extension of the current leisure management contract to facilitate changes. This would bear an additional cost of approximately £123,000 for each month extended.

### **Social Value**

- 5.12. The project began its procurement phase during October 2016. Throughout the procurement process all social value implications, in accordance with the Public Services (Social Value) Act 2012, will be considered.

### **Legal and Constitutional References**

- 5.13. Constitution, Responsibility for Functions, Annex A, sets out the terms of reference of the Policy and Resources Committee and states that 'if any report comes with the remit of more than one committee, to avoid the report being discussed at several committees the report will be presented and determined at the most appropriate committee. If this is not clear, then the report will be discussed and determined by the Policy and Resources Committee'.
- 5.14. In this case the report recommendations cut across the Adults and Safeguarding Committee, whose commissioning plan contains this project, and the Assets Regeneration and Growth Committee. Policy and Resources Committee considered the #SaveBarnetDiving petition in September after its submission to the Council and the Committee requested an options appraisal for the inclusion of diving facilities at the redeveloped Barnet Cophall Leisure Centre.
- 5.15. HB Public Law will advise on the procurement process and will draft the contract documents for the Leisure Management Services Contract, with

support from Bevan Brittan as required.

- 5.16. HB Public Law has been consulted on this matter and its comments have been incorporated into the body of this report.

### **Risk Management**

- 5.17. The key risks relating to the recommended options are outlined in Appendix 1.

### **Equalities and Diversity**

- 5.18. The objectives of the project are to increase participation across all population groups and to ensure that improved sport and physical activity provision in the borough reflects the diverse needs of Barnet residents.
- 5.19. As part of the Outline Business Case and the development of the core facilities mix, consultation and engagement were conducted with Barnet residents and discussions with community groups were carried out. The consultation process involved eight focus groups for residents with protected characteristics, to understand their needs and views on the current and future leisure service provision and to inform the equality impact assessment (EIA) for the project. The focus groups were: young people; leisure centre non-users; BME people; women; older people; people with learning disabilities; deprived communities and people with physical disabilities.
- 5.20. An Equalities Impact Assessment carried out in December 2014 suggested that the outcomes of the project would not discriminate against any group and indicate a potential overall positive impact of the proposals. The proposals will contribute to Barnet's strategic equalities objective by enabling all Barnet's residents to share the benefits of growth and improve life expectancy.
- 5.21. The EIA noted that if diving was not part of the core facilities mix, this would have a negative impact on members of the diving and synchronised swimming clubs. If the plans are approved with the current facilities mix, Council officers will work in partnership with Barnet Copthall Swimming Club and the Council's leisure operator to review signposting to diving opportunities within the region.

### **Consultation and Engagement**

- 5.22. Subsequent to agreement of the core facilities mix in December 2015, two informal public engagement sessions were held in March and July 2016 at Barnet Copthall Leisure Centre and near to Victoria Recreation Ground as part of the pre-application process for a planning application. Responses and comments submitted were used to inform and assist in developing designs as part of the pre-application process.

- 5.23. These drop in sessions were communicated via letters to an approximate total of 4,800 households, detail displayed on information boards and display screens within Barnet Better leisure facilities and publicised on the Council's website and social media.
- 5.24. 367 informal questionnaires were completed either at the sessions or online, with 145 relating to Barnet Copthall. These showed that 76% (March) and 66% (July) supported the new scheme at Barnet Copthall as shown in the preliminary designs.

### **Barnet Copthall Swimming Club**

- 5.25. In order to assist with developing and further verification of detail, a meeting was held with Barnet Copthall Swimming Club (BCSC) Committee members in October 2016. Representatives included the Club Secretary, Head Coach and Committee members for diving and synchronised swimming.
- 5.26. The Club confirmed that they run squads across a range of disciplines including: swimming, masters (18 years +), diving and synchronised swimming. The diving squad is part of Barnet Copthall Swimming Club and has equal status with the other disciplines. As part of the Club constitution all disciplines have a representative on the Management Committee
- 5.27. BCSC swimming membership (including masters) comprises approx. 500-550 members. This compares to an average of 28 for diving and 19 for synchronised swimming.
- 5.28. Communication was received from the Chairman and Head Coach of Barnet Copthall Swimming Club in August 2016, outlining their support of the Council's proposals and confirming no affiliation with the #SaveBarnetDiving petition

### **#SaveBarnetDiving**

- 5.29. Subsequent to an informal drop in session at Barnet Copthall Leisure Centre in July 2016, a petition was initiated by '#SaveBarnetDiving', opposing the exclusion of diving facilities from the proposed new Barnet Copthall Leisure Centre.
- 5.30. This petition is an online petition hosted via website 38 degrees, which has a tool enabling members of the public to create campaigns and petitions. The #SaveBarnetDiving petition has been shared widely; including local, regional and national press coverage and has also been extensively promoted on social media.
- 5.31. This campaign has now reached approximately 7,624 signatures (as at 22 November). However, individuals who have signed the petition cannot be verified as living, working or studying within Barnet. Whilst the

Council's constitution does not require petitioners to live in Barnet; but they must live, work or study in Barnet, at the point of submission in August 2016 the petition had approximately 55% of signatures from those who had registered with a Barnet postcode.

- 5.32. In October 2016 officers conducting the feasibility study met members of the #SaveBarnetDiving petition group, which included the lead petitioner. The petition group provided information to officers which was cross checked and used to form part of the feasibility study.

## **6. Other Local Authority Engagement**

### **London Borough of Merton (LBM)**

- 6.1 During the feasibility study the project consulted with the London Borough of Merton. LBM are currently building a new leisure centre to replace the existing Morden Park Pools. The new centre will be a wet and dry based leisure facility with a commitment to include diving.
- 6.2 The Council has a vision to create a 'family friendly facility' (which was endorsed during local elections). Further importance was also placed on providing school swimming (curriculum based) as schools do not have facilities. There was also a commitment to increase opportunities for the increasing numbers of young people in the borough as well as addressing the leisure needs of an increasingly diverse community and ageing population.
- 6.3 The consultation approach focused on the available budget, creating a 'pick and mix' style approach. The tone of this approach highlighted the desire to develop a new facility but placed an emphasis on affordability. The consultation was carried out by an independent consultation company in 2014.
- 6.4 The top three consultation responses were; café, diving and a 6 lane 25m pool. The LB Merton officer could not recall the total number of respondents, but did note that there was a strong diving lobby which was represented within the consultation results.
- 6.5 The recommended facility mix was reported to Merton's Cabinet which endorsed the public consultation and agreed mix of facilities. Diving was retained in the smaller pool which will operate as a multi pool hall. Merton stated that the inclusion of diving does not have a positive impact on income or a strong and sustainable business case.
- 6.6 There are presently two independent diving clubs based at Morden Park Pools. The clubs offer opportunities at a development standard according the diving pathway.
- 6.7 A future facility is due to commence construction in Spring 2017 and is included in the leisure management contract which is operated by GLL

## 7. Insight

- 7.1 Insight information was used in the previous Revised Outline Business Case, which informed the consultation and communications planning for this phase.

## 8. BACKGROUND PAPERS

### Committee Papers

- 8.1 Cabinet Resources Committee, 27 September 2011 (Decision item 15) – approved the negotiation of terms, with the Contractor, Greenwich Leisure Limited, for termination of the current Leisure Management Contract.  
<http://barnet.moderngov.co.uk/CeListDocuments.aspx?Committeeld=151&MeetingId=456&DF=27%2f09%2f2011&Ver=2>
- 8.2 Cabinet Resources Committee, 18 October 2012 (Decision item 15) – approved the Sport and Physical Activity Strategic Outline Case, including the draft SPA Strategy Statement.  
<http://barnet.moderngov.co.uk/ieDecisionDetails.aspx?ID=4416>
- 8.3 Cabinet Resources Committee, 4 November 2013 (Decision item 5) – approved the Sport and Physical Activity Outline Business Case.  
<http://barnet.moderngov.co.uk/ieDecisionDetails.aspx?ID=5035>
- 8.4 Health and Well-Being Board, 12 June 2014 (agenda item 14) – approved the establishment of the Fit and Active Barnet (FAB) Partnership Board and noted the Sport and Physical Activity (SPA) Strategy delivery plan  
<http://barnet.moderngov.co.uk/documents/s15393/Fit%20and%20Active%20Barnet%20Partnership%20Board%20and%20Sport%20and%20Physical%20Activity%20Strategy%20Delivery%20Plan.pdf>
- 8.5 Policy and Resources Committee, 21 July 2014 (agenda Item 8) – approved the Sport and Physical Activity Outline Business Case.  
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=7860>

- 8.6 Policy and Resources Committee, Tuesday 17<sup>th</sup> February 2015 7.00pm (Agenda Item 9) Sport and Physical Activity Review Revised Outline Business Case  
<http://barnet.moderngov.co.uk/mgAi.aspx?ID=11370#mgDocuments>
- 8.7 Policy and Resources Committee, Wednesday 16<sup>th</sup> December 2015 7.00pm (Agenda Item 12) The relocation and redevelopment of Church Farm Leisure Centre and the redevelopment of Barnet Copthall Leisure Centre  
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8349&Ver=4>
- 8.8 Policy and Resources Committee, Thursday 1<sup>st</sup> September 2016, 7.00pm (Agenda Item 6c) Member's Item: Cllr Alison Moore - #SaveBarnetDiving and (Agenda Item  
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8729&Ver=4>

### Consultation Reports

- 8.9 **Phase 1 2012 – Needs assessment;**  
<http://barnet.moderngov.co.uk/documents/s16260/Appendix%20C%20-%20SPA%20Needs%20Assessment.pdf>
- 8.10 **Phase 2 2013 – ORS Final report-**  
[https://engage.barnet.gov.uk/adult-social-services/sport-and-physical-activity-review/user\\_uploads/final-leisure-services-report.pdf](https://engage.barnet.gov.uk/adult-social-services/sport-and-physical-activity-review/user_uploads/final-leisure-services-report.pdf)
- 8.11 **Phase 3 2014 - ORS Final report**  
<http://barnet.moderngov.co.uk/documents/s21252/Appendix%205%20-%20ORS%20Consultation%20report.pdf>
- 8.12 **Phase 4 2015 - ORS Final report – Appendix 1**  
[https://engage.barnet.gov.uk/adult-social-services/sports-and-physical-activity-cf-copthall/supporting\\_documents/Barnet%20SPA%20Phase%204%20%20Final%20report%20v6.0.pdf](https://engage.barnet.gov.uk/adult-social-services/sports-and-physical-activity-cf-copthall/supporting_documents/Barnet%20SPA%20Phase%204%20%20Final%20report%20v6.0.pdf)
- 8.13 **Health Impact Assessment (HIA) 2015 – Appendix 2**  
[https://engage.barnet.gov.uk/adult-social-services/sports-and-physical-activity-cf-copthall/supporting\\_documents/CF%20%20HIA%202015%20Final.pdf](https://engage.barnet.gov.uk/adult-social-services/sports-and-physical-activity-cf-copthall/supporting_documents/CF%20%20HIA%202015%20Final.pdf)

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# Sport & Physical Activity Project

## Diving Feasibility Study

October 2016

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## 1. Executive Summary

### **Introduction**

Following the Policy and Resources Committee meeting on the 1<sup>st</sup> September 2016, the council commissioned a feasibility study to assess the feasibility of including diving within the new Barnet Copthall Leisure Centre. The study has developed options to amend the current approved facility mix for the proposed redevelopment of the Centre to include diving and in doing so, provide details on the capital cost, revenue financial impact, participation levels and impact, and planning implications. The feasibility study has matched the existing diving facilities in the current Barnet Copthall Leisure Centre. This report sets out the potential implications of its possible inclusion within the proposed redevelopment.

The feasibility study includes the following elements:

1. Development of design options to include diving facilities in the new Barnet Copthall Leisure Centre, to include necessary ancillary circulation, changing and plant areas. Four options were identified, with two options developed in detail.
2. Undertake required engagement on the proposals e.g. through meetings with Planning Officers.
3. Undertake analysis of the capital cost and impact linked to the required design amendments.
4. Undertake analysis of risks associated with incorporation of either option at this stage of the project e.g. planning, environment, and likely delay to programme.
5. Confirm the capacity, usage and weekly programme hours for swimming, diving and synchronised swimming at the existing Leisure Centre.
6. Confirm the income and expenditure attributable to swimming, diving and synchronised swimming at the existing Leisure Centre.
7. Estimate the financial impact on the current business case for the new Centre of including diving within the facility mix.
8. Confirm details of the booking system and promotion of diving at the existing Centre
9. Investigate potential grant funding sources for the diving provision.
10. Engage with other relevant London local authorities to understand their approach to diving and methodology

The study has been carried out by council officers and CSG, with specialist input from Saunders Boston architects (development of design options) and the Sports Consultancy (elements 5-9 above).

### **Design**

Two design options were developed:

- To include diving within the current facilities mix arrangement (Option 1)
- To include diving in a separate pool hall (Option 2)

As part of the feasibility study, further consultation was undertaken with relevant stakeholders, namely: GLL (the current Leisure Management Operator); Barnet Copthall Swimming Club (BCSC); the #SaveBarnetDiving petition group and Planning Officers.

The options were reviewed against the current design submitted for planning approval, by the technical design team, and areas requiring change were highlighted. The options and information supplied by the technical design team were then costed, using elemental rates as per the Royal Institute of British Architects (RIBA) Stage 3 cost plan, and adjusted for inflation.

### **Financial impact**

The extra over cost for providing each option has been estimated as follows:

	<b>Option 1</b>	<b>Option 2</b>
Extra over cost from Stage 3 design	£2,428,000	£4,517,000

It should be noted that the above cost is for the capital construction costs only. It does not include any additional costs that may occur due to the need to continue to operate the existing centres for a longer period of time as a result of any decision to include diving and the subsequent programme elongation to gain planning approval and construct the new centre.

In participation terms, this review has confirmed that diving and synchronised swimming form a relatively small element of overall swimming participation at the Centre.

In income terms, diving and synchronised swimming combined provide only about 6% of the total wetside revenue.

Analysis undertaken by The Sports Consultancy of the diving options presented are estimated to have a negative financial impact when compared to the RIBA Stage 3 business plan for the Centre.

In the case of Option 1, this is largely because the inclusion of diving and synchronised swimming in the training pool reduces the swimming lesson programme and hence income. In the case of Option 2, overall income increased with the provision of a fourth pool. However, this benefit is outweighed by the fact that the significantly larger building brings with it increased costs, for premises operations and staffing.

The increased capital requirement of both options means an increased prudential borrowing requirement, which will be paid back through the management fee provided to the council through the new leisure management contract. There are no additional grant funding sources that will address the additional capital cost. Overall, the impact of the two options has been estimated as follows:

- **Option 1:** reduced revenue income to the council of £120,000 per annum and increased annual revenue required to fund borrowing of £132,000
- **Option 2:** reduced revenue income to the council of £183,000 per annum and increased annual revenue required to fund borrowing of £246,000

There are also additional risks to the project, especially in relation to Option 2, in that it may impact on the ability to re-site the Mill Hill Rugby Club pitches. This is due to the increased building footprint and need to increase the size of the drainage swales around the building.

The diving petition group has highlighted concerns around the ease of booking diving sessions and also with the number of cancellations of diving sessions through the year due to swimming galas. While Sports Consultancy analysis indicates that there is validity in both of these points, their assessment shows they are unlikely to materially improve the increased revenue burden that diving presents.

## 2. Design Options

The design aspect of the feasibility study modelled two options, outlined below, which accommodate the inclusion of a diving facility. Both options developed include the current diving board heights of 3x1m boards, 1x3m board, 1x5m board and 1x0.5m board

The proposals have modelled:

- a. To include diving within the main community pool ('Option 1')
- b. To include diving in a separate purpose built pool hall ('Option 2')

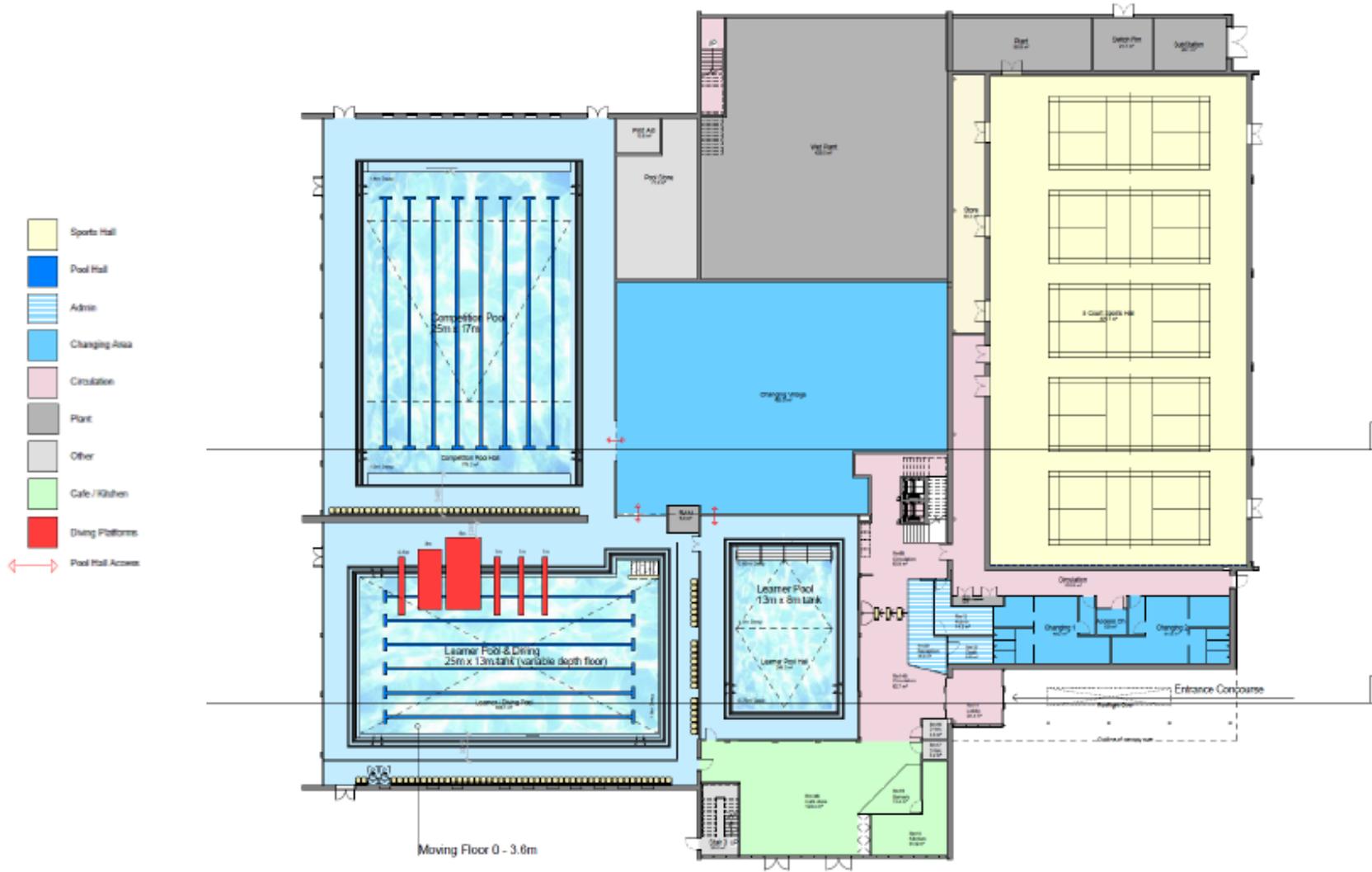
The methodology for this was as follows:

- Architects developed the options, to include necessary ancillary circulation, changing and plant areas;
- The design team reviewed the options to understand the main design changes needed to facilitate each of the two options;
- Engagement was undertaken with Greenwich Leisure Limited (GLL, current leisure operator), Barnet Copthall Swimming Club (full committee including swimming, diving and synchronised swimming representatives), Planning officers and the #SaveBarnetDiving petition groups;
- Cost manager reviewed options and related comments from the design team to develop high level capital costs to incorporate each of the options.

### Option 1- Community Pool

This option, developed by Saunders Boston Architects, uses the plans developed at RIBA 3 and incorporates diving within the existing layout of the proposed building, as follows:

Option 1



Ground floor layout





Section of building as shown in Stage 3 Design (without diving)



Section of building to show building with diving added to the Community Pool illustrating increased height and deeper pool tank / moveable floor (Note: detail has been removed from remaining building area as this is unchanged)

Option 1



Illustration to show the massing of the building, with diving added to the community pool

**Key considerations:**

- The length of the pool is used to place the diving boards to meet regulations, as the width of the existing pool is insufficient to place the required number of boards.
- Due to the width / length of the pool and required regulations, the pool could not be used in a mixed mode with diving and swimming operating at the same time.
- As the water area has not significantly increased, additional requirements to filter and heat the water would be minimal, with no increase in the size of the plant rooms and village change areas.
- The width of the pool surrounds behind the diving boards to the community pool would need to be enlarged, resulting in an overall increase in area of circa 100 sq.m.
- The height of the building over the community pool area would need to be increased to accommodate diving, ensuring minimum clearances are achieved.
- An increased depth of pool tank, with moveable floor, would need to be introduced to the whole area of the pool with ancillary localised plant room for hydraulic ram to operate the floor.
- The scale and volume of pool hall would change with a very high ceiling. This would create a more cavernous atmosphere, which would be less welcoming than the standard height ceiling for young people engaging in the learn to swim programme.
- The first floor layout largely remains unchanged, apart from the extra width of the community pool hall to accommodate the diving boards on the ground floor.

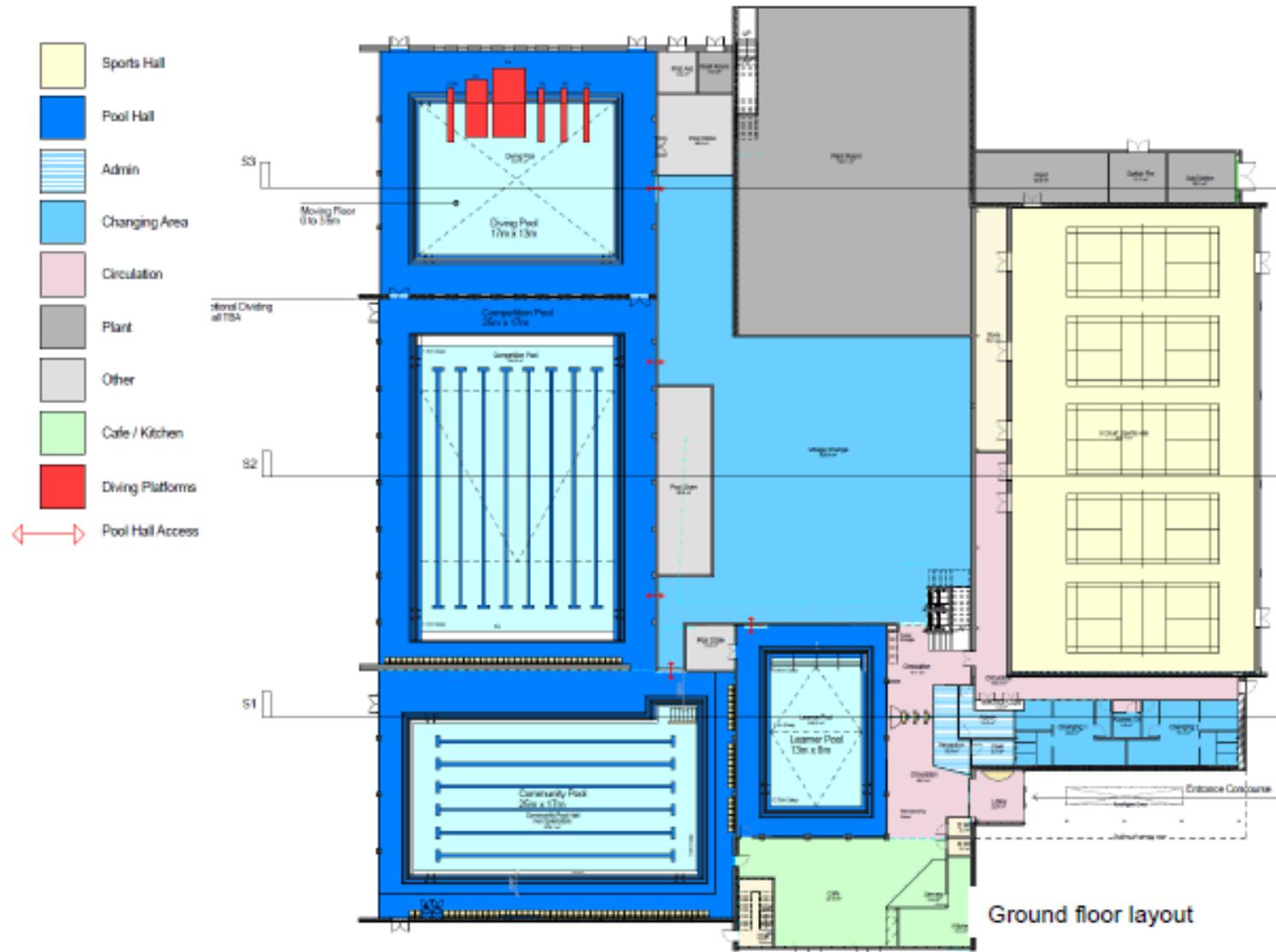
**Pool temperatures**

- Water temperatures for different activities vary. The temperature difference between the community pool and diving pool is circa 2 degrees Celsius. It is thought that with planning and management input, this should not present a significant issue in operating the community pool as a swimming and diving pool.

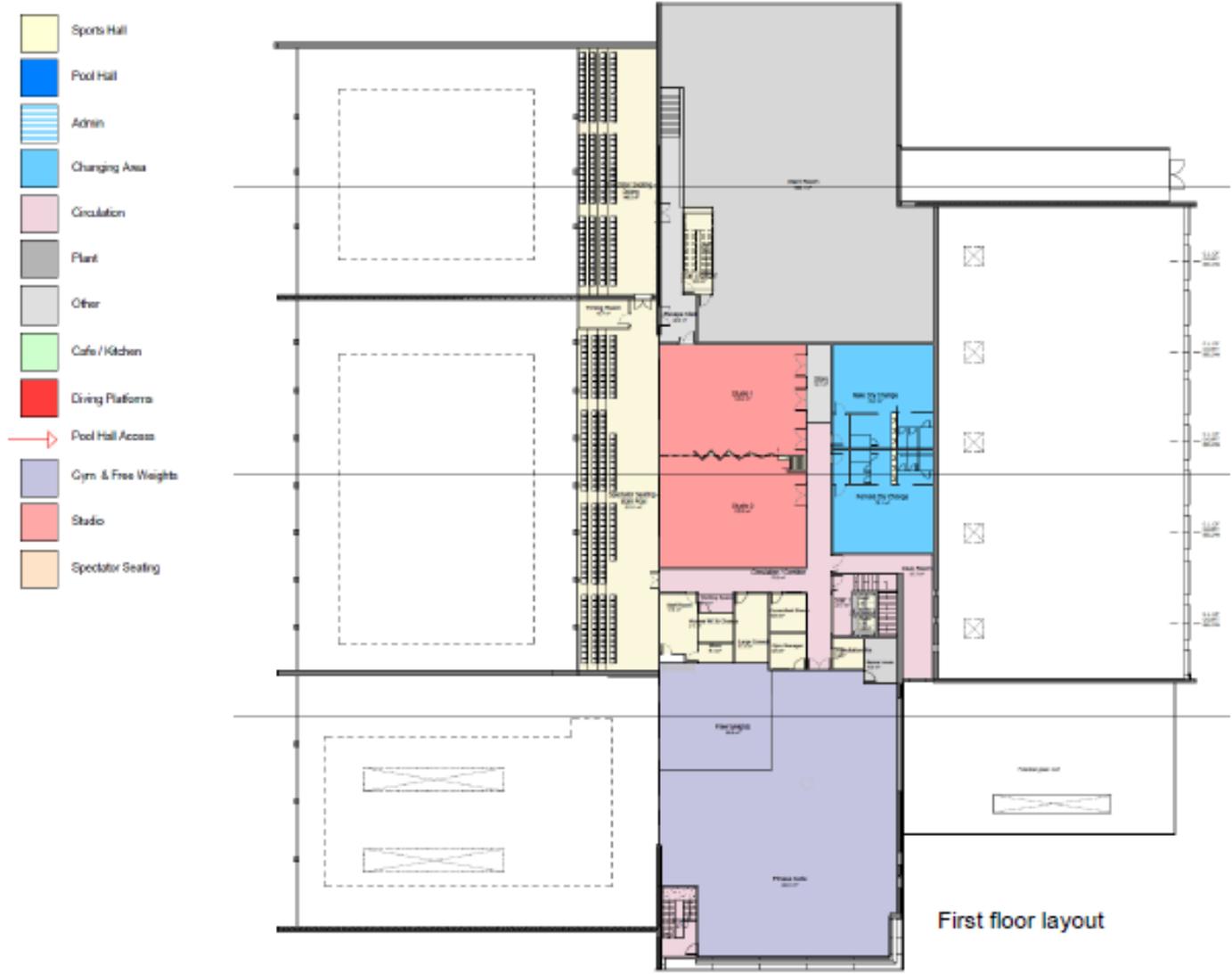
**Option 2**

Saunders Boston Architects considered the plans developed at RIBA 3 to incorporate diving facilities as a separate additional pool hall, as follows:

Option 2



Option 2



Option 2



Section of building to show additional diving pool hall located to the North West

Option 2



Illustration to show the massing of the building, with a separate diving pool added to the North West

#### Key considerations:

- A separate pool hall and tank is created to the north west of the building.
- Additional plant requirements to filter and heat the additional volume of water would be required.
- Due to the increase in water area, additional village changing facilities would be required and ancillary circulation areas etc.
- The additional floor area required would be circa 1000 sq.m.
- The height of the building over the diving pool area would need to be increased from that of the proposed centre at RIBA Stage 3, to accommodate the diving boards as per Option 1.
- A moveable floor would be included to facilitate other uses such as synchronised swimming and gym fit classes.
- A spectator viewing area could be created to watch diving competitions, as shown in the section below.
- The learn to swim programme and timetabled use of the community pool would remain unaffected (as opposed to Option 1).
- The first floor layout remains the same for facilities previously proposed, but the plant room area is enlarged and there is additional area created by void space over the diving pool and an area of spectator seating.

#### Options discounted at an early stage

The feasibility study identified four (4) initial options for the inclusion of diving. Options 1 and 2 were progressed. Two others were discounted at an early stage for the following reasons:

An option to use the learner pool to include diving. This was excluded because:

- To use this pool would require a wholesale re-design of the whole centre.
- The size of the pool is too small to accommodate the requirement to replicate existing provision.
- The gym area is located directly above it, and therefore there is insufficient height to include diving boards.

An option to use the competition pool to include diving. This was excluded because:

- Inclusion in this pool would further decrease the ability to provide swimming lessons and run competitions.
- Due to the width of the pool, diving could be placed across the width, but there would be an increased cost as a moveable boom would need to be incorporated to separate divers and swimmers.
- The remaining area of the pool would only be suitable for lessons for those learning to swim due to depth and length.

### 3. Engagement

The feasibility study included engagement with Greenwich Leisure Limited (GLL) as the current leisure management operator, Sport England, the Amateur Swimming Association (ASA), Barnet Copthall Swimming Club and the #SaveBarnetDiving petition group.

The design options were only shared with Planning Officers and GLL as the leisure management operator and for commercial confidentiality reasons

A summary of points of discussion are noted below:

Meeting participants	Date	Venue	Summary of main points noted in relation to the Technical Options
Barnet Copthall Swimming Club Committee Representatives from Swimming, Diving and Synchronised Swimming were present	19/10/16	Barnet Copthall Leisure Centre	The meeting mainly focussed on user numbers, competition and elite development, coaching, Club income and expenditure, current use of the pools and management. It was noted (by LBB) that feasibility would look at diving in addition to the current pool mix as well as part of it. Any option must be financially sustainable.
Greenwich Leisure Limited (GLL) Barnet Partnership Manager and National Sports and Aquatics Manager were present	19/10/16	London Aquatics Centre	Option 1 – would require less staff cover (than Option 2) but would significantly impact on the ability to provide swimming lessons. Option 2 – it would be unlikely that the diving pool and learner pool would be used at the same time, as demand for the learner pool has subsided by the time the diving pool becomes popular on weekday evenings. Additional staff cover would be required to manage the separate diving pool and the depth / additional area and volume would increase running costs.
Planning Officer	17/10/16	Barnet House	Subject to further development of any future amendment to the current design, or separate application to incorporate Option 1 or 2 into the scheme, would not have a significant impact on the final decision made.
#SaveBarnetDiving petition group	13/10/16	North London Business Park	LBB officers noted that feasibility study will look at options to include diving provision, capital costs and future running costs, views of Planning officers, as well as future predicted usage and income to develop an overall picture. The study will focus on diving but will consider other users of the multi-activity pool. #SaveBarnetDiving provided officers with a copy of participation figures. In addition to operational issues which were highlighted throughout the discussion.

#### 4. Analysis of design amendments (from RIBA Stage 3)

Design options developed by Saunders Boston Architects were circulated to the Sport and Physical Activity design team for comparisons to be made against the current RIBA Stage 3 designs with the agreed facility mix. Changes that would be needed to accommodate each of the design options were reported back and the main points are summarised below:

Discipline	Comments on Option 1	Comments on Option 2
Architect	<ul style="list-style-type: none"> <li>• Lower capital cost increase compared to option 2</li> <li>• Plant &amp; Village Change size remain unaltered other than increased filter sizes for deeper water</li> <li>• Reduced learn to swim programme to accommodate diving programme</li> <li>• Potential revenue reduction</li> <li>• High level spectator seating limited</li> <li>• Change in water temperature can affect user experience – but thought to be manageable</li> </ul>	<ul style="list-style-type: none"> <li>• Separate diving facility to support diving programme</li> <li>• Spectator seating provided for diving</li> <li>• Additional flexible water option for synchro etc.</li> <li>• Existing community pool and learn to swim programme unaffected</li> <li>• Increase in mass at rear of building not front Champions Way</li> <li>• Larger footprint / mass / floor area</li> <li>• Additional pool hall requirement</li> <li>• Increased Village Change size</li> <li>• Increased plant room size</li> </ul>
Civil Engineer	<ul style="list-style-type: none"> <li>• No significant impact</li> </ul>	<ul style="list-style-type: none"> <li>• Pond will require reprofiling along the southern elevation of the building to the west of the café to allow for sufficient footways for fire escape and maintenance</li> <li>• Increase in impermeable area for option 2 would be approximately 1,010 m<sup>2</sup>, which cannot be accommodated within the current pond design. Pond to be increased by approximately 8% to allow for sufficient additional surface water storage.</li> </ul>
Landscape Architect	<ul style="list-style-type: none"> <li>• A circulation path to the south will need to be re-instated along the southern elevation and re-providing the path as shown presently will not impact on the proposed swales</li> </ul>	<ul style="list-style-type: none"> <li>• The proposed hard standing area along the northern boundary will still need to be provided (on the increased building footprint) adjacent to the new building which will reduce the area that has been identified for use by the neighbouring rugby club.</li> <li>• The proposed service access will still need to remain in roughly the same location due to root protection zones of existing trees. The proposed area of the access road will therefore increase by approximately 15% to allow it to align with the new location of the service area</li> </ul>
Mechanical and Electrical Engineer	<ul style="list-style-type: none"> <li>• Increase in size of some air handling equipment due to increased volume</li> <li>• Increase in lighting requirements</li> </ul>	<ul style="list-style-type: none"> <li>• Additional air handling units</li> <li>• Additional supply and extract ductwork</li> </ul>

	<p>due to increased volume.</p> <ul style="list-style-type: none"> <li>• Power supply to moving floor required</li> </ul>	<ul style="list-style-type: none"> <li>• Additional LPHW pipework to serve AHUs</li> <li>• Power supply to moving floor</li> <li>• Additional lighting for new pool hall</li> <li>• Additional filter and heating vessels for increased water volume in new pool</li> </ul>
<p>Structural Engineer</p>	<ul style="list-style-type: none"> <li>• The addition of diving boards will require an increase in the width of the pool surround</li> <li>• The pool tank wall thickness may need to be increased to reflect the increase in water pressure due to the increased depth</li> <li>• An additional steel trussed structural bay supporting the pool hall roof. This will require steel beams where the change from the pitched roof to flat roof occurs. Quantity of columns and curtain walling will also need to increase</li> </ul>	<ul style="list-style-type: none"> <li>• Additional 17.0x13.0m concrete pool tank has been included to a depth of 3.6m below ground floor level, with thicker walls than the standard pools, due to the increased depth/pressure</li> <li>• Additional columns will be required for the roof above the new pool hall, and to support the increased in first floor and roof area above the plant room. These will require additional foundations of reinforced concrete pile caps, piles and concrete ground beams</li> <li>• Additional steel truss roof and curtain walling will be required to encapsulate the new pool hall</li> </ul>

## 5. Capital Cost Impact

The current costs presented below have been developed considering design changes required for each of the design options. An allowance for inflation, based on the construction programme, has been included, also as per the Stage 3 Cost Report.

	<b>Barnet Copthall Stage 3 Cost Plan</b>	<b>Barnet Copthall Diving Option 1</b>	<b>Barnet Copthall Diving Option 2</b>
Gross Internal Floor Area	6,287m <sup>2</sup>	6,387m <sup>2</sup>	7,511m <sup>2</sup>
Stage 3 Cost Plan	£22,540,000	£22,540,000	£22,540,000
Additional capital cost for Diving Provision	n/a	£2,428,000	£4,517,000
Total Stage 3 Cost incl. Diving Provision	n/a	£24,968,000	£27,057,000

Overall affordability is considered in section 9, taking into account the revenue forecasts set out in section 8.

It should be noted that the costs above are for the construction elements only. Costs do not take account of any additional costs / loss of revenue to the London Borough of Barnet through the current Leisure Centres remaining operational for a longer period of time due to programme elongation caused by revised planning approvals or additional construction requirements.

## 6. Current Capacity, Usage and Weekly Programme Hours for Swimming, Diving and Synchronised Swimming

### Programming

The existing Barnet Copthall Leisure Centre has three pools:

- 25m main pool
- 25m training pool
- A multi-activity pool with a moveable floor (which accommodates diving provision)

The weekly swimming programme for the existing centre is made up of the following main types of usage:

Type	Hours (Source: GLL)	% of Hours
Casual swimming	75.00	35%
School swimming	51.50	24%
Barnet Copthall Swimming Club (BCSC) Swimming section/squad	30.00	14%
GLL/Better Learn to Swim School	19.25	9%
BCSC Diving section/squad	3.75	1.5%%
GLL/Better Learn to Dive School (aka Tom Daley Academy)	9.50	4%
BCSC Synchronised Swimming section/squad	4.00	2%
Swim fit Classes	21.25	10%
GLL/Better Synchronised Swimming lessons	0.75	0.5%

There are also limited hours given over to other activities such as public diving sessions (circa 1 hour per week), the sub-aqua club (circa one hour per week) and birthday parties.

The activity that takes place in the multi-activity (diving) pool is as follows:

Type	Hours (Source: GLL)	Hours (Source: petition group)
Barnet Copthall Swimming Club (BCSC) Swimming section/squad	0.50	0.00
GLL/Better Learn to Swim School	5.00	4.50
BCSC Diving section/squad	3.75	Not provided
GLL/Better Learn to Dive School (aka Tom Daley Academy)	9.50	9.50
BCSC Synchronised Swimming section/squad	4.00	5.50
GLL/Better Synchronised Swimming lessons	0.75	0.00
Sub-aqua club	0.00	1.00
Other*	3.00	15.00
<b>Subtotal: All diving activity</b>	<b>13.25</b>	<b>9.50</b>
<b>Subtotal: All synchronised swimming activity</b>	<b>4.75</b>	<b>5.50</b>

\*Other category included classes, water workout sessions, deep water workout sessions and toddler swimming sessions.

Importantly, all of the sessions in the table above, other than diving, synchronised swimming and sub-aqua can be accommodated in the proposed new facility.

This table shows there is not a significant discrepancy between the information provided by GLL and that provided by the petition group in terms of the key usage areas that concern this feasibility study (i.e. diving and synchronised swimming). These figures are used to inform the financial analysis in section 8.

### Participation and usage

Through consultation with GLL, the petition group and BCSC the following participation information was collated (casual swimming and public diving not included):

Type	Participants (Source: GLL)	Participants (Source: BCSC)	Participants (Source: Petition group)
Barnet Copthall Swimming Club (BCSC) Swimming section/squad	Not provided	500-550	Not provided
GLL/Better Learn to Swim School	1,362	Not provided	Not provided
BCSC Diving section/squad	26	28 (has varied between 24-40)	28
GLL/Better Learn to Dive School (aka Tom Daley Academy)	63 <sup>1</sup>	Not provided	80-100
BCSC Synchronised Swimming section/squad	Not provided	20 (has varied between 12-24)	Not provided
GLL/Better Synchronised Swimming lessons	10	9	Not provided
School swimming	1,599	Not provided	Not provided

Both BCSC and the petition group have suggested that there is a waiting list for lessons on the Tom Daley Academy. BCSC estimates that about 18 people are on list, whereas the petition group believes it is 20-30. There is also a reported waiting list of 6 for synchronised swimming lessons.

The figures in Table 3 show that for BCSC membership, swimming makes up by far the largest part of the membership with 500-550 compared to 26-28 for diving and around 20 for synchronised swimming. Given that there are 9.5 hours of GLL/Better Learn to Dive lessons provided at the moment per week with a maximum capacity of 10 people per class; it suggests that 80-100 participants can be accommodated in the current programme timetable.

<sup>1</sup> Individuals enrolled on GLL system, October 2016

## 7. Current Income and Expenditure

GLL provided income data for the first half of the year January to June 2016, for the full swimming programme at Barnet Copthall. The table below summarises how this is broken down across the key income categories:

Type	% of total swimming income)	Cost of delivery as a % of income
Casual swimming	11%	n/a
School swimming	26%	n/a
Barnet Copthall Swimming Club (BCSC) Swimming section/squad	18%	31%
GLL/Better Learn to Swim School	32%	19%
BCSC Diving section/squad	2%	88%
GLL/Better Learn to Dive School (aka Tom Daley Academy)	2%	20%
BCSC Synchronised Swimming section/squad	2%	40%
Other	4%	n/a

The income data provided supports the data on participation shown in the previous section, in that the GLL/Better Learn to Swim programme, the BCSC swimming programme and school swimming provide the largest proportion of the overall wetside income. As a comparison, the BCSC swimming programme generates about 18% of income (and about 500 participants) compared to 2% for both the diving and the synchronised swimming programmes (and circa 28 and 20 participants respectively).

Of the uses outlined above, the only ones that definitively could not be accommodated in the new Centre are diving and synchronised swimming (6% of income in total), although some elements of the "Other" category (4%) may also not be accommodated, e.g. the sub-aqua club.

## 8. Revenue Implications

As set out in section 5, the capital cost impact of including diving in the facilities mix is £2.4m for Option 1 and £4.5m for Option 2.

In order to estimate the revenue impact of diving, the RIBA Stage 3 business plan was used as a basis. This has been developed using The Sports Consultancy's (TSC) business planning model with all revenue projections benchmarked against TSC's Operational Database, which contains over 1,000 financial year records from over 350 public leisure facilities across the UK. The specific assumptions and adjustments for the two options were as follows:

### Option 1

- As the diving provision is included within the training pool, the diving and synchronised swimming hours of usage displace programmed usage during the peak hours of operation as the pool cannot be used for other activities while it is taking place. Most of the programming lost is for swimming lessons
- For this reason, diving and synchronised swimming hours as per current levels have been assumed.
- The increased building footprint means that certain expenditure items (e.g. utilities and repairs and maintenance) have been increased proportionately
- Lifecycle costs (which are based on a percentage of construction cost per annum) have been increased in line with the increase in capital costs
- No extra lifeguard provision is required as the number of pools and pool sizes remains unchanged
- Lesson staff provision has been adjusted in line with the revised programme of usage.

### Option 2

- As a separate diving pool is provided in this option, there is no reduction to the existing swimming programme and the diving and synchronised swimming usage is additional
- Given the additional pool space, an allowance has been made for an increased diving programme and a proposed increase in participants to circa 200 in the medium term
- An allowance has been included for additional swimming usage; however, this has been taken in the context of Sport England's Facilities Planning Model report for the area (from the original feasibility study), which indicated that the level of supply in the Barnet Copthall area was above the London average but uncomfortably busy (with quality of provision being the main issue)
- The significantly increased building footprint (circa 19%) means that certain expenditure items (e.g. utilities and repairs and maintenance) have been increased proportionately
- Lifecycle costs (which are based on a percentage of construction cost per annum) have been increased in line with the increase in capital costs
- Additional lifeguard provision has been included to reflect the provision of an additional pool
- Lesson staff provision has been adjusted in line with the revised programme of usage.

Based on these assumptions, the implications of the two options compared to the RIBA Stage 3 business plan (Mid-Range scenario) are summarised in the table below:

BASE (MID-RANGE) SCENARIO ESTIMATES	RIBA Stage 3 BC Option	BC Diving Option 1	BC Diving Option 2
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APPENDIX 1



MANAGEMENT FEE TO LBB	£491,416	£371,184	£308,441
Difference from RIBA Stage 3	n/a	(£120,232)	(£182,975)

The table shows that both options are estimated to have a negative financial impact on the business plan for the new Centre. In the case of Option 1, this is largely because the inclusion of diving and synchronised swimming in the training pool reduces the swimming lesson programme and hence income. In the case of Option 2, overall income increases with the provision of a fourth pool; however, the significantly larger building brings with it increased premises costs as well as the need for increased staffing (lifeguards) for the new pool.

## 9. Affordability and Overall Financial Impact

In terms of overall affordability both of the schemes not only reduce the revenue income to the Council from the operator, but also bring an increased capital requirement. To illustrate this, if this increased capital requirement is funded through prudential borrowing and assuming an interest rate of 3.5% and a borrowing term of 30 years, the total revenue implications of the Base scenarios for the two options would be as follows:

- **Option 1:** reduced revenue income to Council of £120,000 per annum plus increased annual revenue required to fund borrowing of £132,000
- **Option 2:** reduced revenue income to Council of £183,000 per annum plus increased annual revenue required to fund borrowing of £246,000

Financial analysis indicates that while the existing RIBA Stage 3 cost estimate is considered affordable under these assumptions, both Options 1 and 2 are unaffordable.

## 10. Booking System and Diving Promotion

During communication with #SaveBarnetDiving and the Barnet Copthall Swimming Club, it was suggested that there is a waiting list for lessons on the GLL Learn to Dive programme (aka Tom Daley Academy).

Two issues relating to the promotion of diving at Barnet Copthall have been raised by the petition group:

- There are difficulties with booking diving lessons as they are not clearly advertised through the website
- Diving sessions are cancelled at short notice to accommodate swimming competitions, which impacts on the continuity of the diving programme.

### Booking system

Places in the GLL Learn to Dive programme (aka Tom Daley Diving Academy') lessons can be booked in person at the Centre or online through the GLL online booking system, "home portal". From our review, the portal is difficult to locate on the main GLL Barnet Copthall website. If you are searching for lessons through the main website you are directed to contact the Centre directly through telephone or internal e-mail. This latter route is again not straightforward.

However, once the home portal is located, lessons and their availability are clearly displayed. Junior Dive Beginner sessions are not included on the home portal and these are currently full to capacity.

### Cancellation of Diving Sessions

The petition group stated that there are a large number of occasions when the training pool is closed to accommodate swimming competitions. The group reported that there have been more than ten cancellations in 2016 and that they are often at only a week's notice.

GLL confirmed that by December 2016 there will have been 19 closures due to galas throughout the calendar year. The closures only take place when a large gala is booked on a Sunday, as the diving pool is used for competitor warm-up to support the event. This is a longstanding arrangement that has been in place since early 2002 as warm-ups are an essential requirement for competitive swimmers. Barnet Copthall hosts 25 m short course regional swimming championships.

GLL stated that notice of closure is given three weeks beforehand and is advertised in the Centre and online. The BCSC coaches are also informed.

The most recent closure was on 30 October and the cancellation was listed on the website. There was no information displayed as to the possible rescheduling of diving activities. Operational improvements which relate to both the promotion and booking system for diving lessons have been raised with GLL, which include a future review of the management and programming of public diving sessions.

## 11. Funding Opportunities

The capital cost and affordability implications outlined in Section 4 mean that any potential additional grant funding opportunities would be important to the Council. A review of possible additional grant funding sources has been undertaken and the findings are as follows:

- No significant capital funding schemes directed at diving clubs have been identified.
- British Diving does not currently offer any diving funding on a club basis. Their input is targeted at individuals on elite performance talent pathways.
- British Diving focuses on the regional 'Beacon' centres, e.g. Luton and Manchester, which provide the full range of diving facilities, including dry diving. Talented athletes are channelled to these facilities.
- The Amateur Swimming Association (ASA) has indicated previously, in regards to other projects that they are unable to provide capital funding for diving.
- It is unlikely that Sport England would specifically fund the diving schemes proposed here as the maximum amount of funding from their Strategic Facilities Investment Fund has already been provisionally ring-fenced for the combined redevelopment of Barnet Copthall and Victoria Recreation Ground..

## 12. Key Risks

Risk No.	Diving Option	Risk Description and Consequence	Mitigation	Status	Date Opened	Risk Nature	Risk Rating	RAG	Risk Owner	Latest update
1	n/a	If diving is not included within the facilities mix, there will be a negative impact on those residents who participate in diving and synchronised swimming and a loss of the sport from Barnet.	Subject to planning approval of the proposed scheme. The Council and operator will need to work with BCSC and lesson participants to identify opportunities to signpost individuals to other facilities within the region	Open	15/11/2015	Reputational	8	G	Cassie Bridger	
2	n/a	If diving is not included within the facilities mix, the council could be at risk of legal challenge, leading to increased costs, damage to reputation and potential requirement to redesign the scheme (with subsequent programme delays/financial impact)	Regular and comprehensive resident consultation and engagement has been undertaken throughout the project. Legal advice has been provided on an ongoing basis and specialist external legal advice will be obtained if required. Comprehensive review of diving feasibility being undertaken to inform P&R decision in December.	Open	01/08/2016	Reputational/ Financial	8	G	Dawn Wakeling	Legal consult and review of P&R reporting information in November 2016.
3	1, 2	If diving is included within the facilities mix at the redeveloped Barnet Cophall Leisure Centre, then the programme will be delayed whilst a new design is prepared and a new planning application is submitted, leading to financial loss to the council	Early engagement with planning officers to understand implications and requirements. Engagement with construction partner to identify potential mitigation. Progression of New Barnet Leisure Centre without delay.	Open	02/09/2016	Financial	12	A	Dawn Wakeling	
4	1, 2	If diving is included within the facilities mix then there will be an increased capital cost, leading to increased financial burden to the council and potential inability to pay back the prudential borrowing required.	Ongoing financial analysis to understand impact. Potential value engineering with construction partner to identify cost reductions. Review any potential additional funding sources.	Open	02/09/2016	Financial	12	A	Dawn Wakeling	10/11/16: Feasibility work has identified increase in capital cost will be £2.4m for Option 1, £4.5m for Option 2, subject to inflation. No additional funding sources have been identified.

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Risk No.	Diving Option	Risk Description and Consequence	Mitigation	Status	Date Opened	Risk Nature	Risk Rating	RAG	Risk Owner	Latest update
5	2	If option 2 is selected, there will be an increased construction period, leading to loss of income to the council and potential inability to pay back the prudential borrowing required	Ongoing financial analysis to understand impact. Potential value engineering with construction partner to identify cost reductions and time savings.	Open	02/09/2016	Financial	12	A	Dawn Wakeling	
6	2	If option 2 is selected, planners may not approve the scheme due to a significant increase in building size, leading to a requirement to redesign the scheme and subsequent programme delays/financial impact to the council	Early engagement with planning officers to understand implications and requirements.	Open	02/09/2016	Planning/ Financial	8	G	John Stimpson	14/11/16: Planners have indicated that subject to further development any future amendment to the current design, or separate application to incorporate Option 1 or 2 into the scheme, would not have a significant impact on the final decision made.
7	n/a	If diving is not included within the facilities mix, the council reputation could be damaged, with a reduction in satisfaction ratings from residents	Regular and comprehensive resident consultation and engagement has been undertaken throughout the project. Subject to planning consent, work closely with GLL and BCSC to identify opportunities to signpost participants to other facilities within the region.	Open	02/09/2016	Reputational	12	A	Cassie Bridger	
8	1, 2	If the inclusion of diving within the facilities mix reduces interest from leisure operators, then there may be a failed procurement exercise leading to the council having no leisure operator to run the centres	Significant engagement has been undertaken with potential bidders to gauge interest. Specialist leisure consultancy secured to provide advice. Early engagement with bidders to be undertaken if a decision is taken to include diving in the facilities mix.	Open	02/09/2016	Reputational/ Business Continuity	8	G	Dawn Wakeling	

APPENDIX 1

Risk No.	Diving Option	Risk Description and Consequence	Mitigation	Status	Date Opened	Risk Nature	Risk Rating	RAG	Risk Owner	Latest update
9	1,2	If the inclusion of diving within the facilities mix reduces interest from leisure operators, then there may be a less competitive procurement exercise, leading to reduced benefits to residents, a reduction in management fee to the council, decreased satisfaction and potential inability to pay back the prudential borrowing required	Significant engagement has been undertaken with potential bidders to gauge interest. Ongoing financial modelling to understand realistic expectations of management fee. Early engagement with bidders to be undertaken if a decision is taken to include diving in the facilities mix.	Open	02/09/2016	Reputational/ Financial	12	A	Dawn Wakeling	
10	1, 2	If diving is included within the facilities mix, the council may not be able to afford to include the 5 court sports hall at Barnet Copthall Leisure Centre, leading to a reduction in participation, reduced satisfaction from residents	Regular and comprehensive resident consultation and engagement has been undertaken throughout the project. Ongoing financial analysis to understand requirements.	Open	02/09/2016	Reputational	12	A	Cassie Bridger	
11	1, 2	If diving is included within the facilities mix, the council may not be able to afford to include the 5 court sports hall at Barnet Copthall Leisure Centre, risking successful achievement of the Sport England Strategic Facilities Fund. Prudential borrowing requirements will increased with potential inability to pay back as required.	Regular and comprehensive resident consultation and engagement has been undertaken throughout the project. Ongoing financial analysis to understand requirements.	Open	02/09/2016	Financial	12	A	Dawn Wakeling	

APPENDIX 1

Risk No.	Diving Option	Risk Description and Consequence	Mitigation	Status	Date Opened	Risk Nature	Risk Rating	RAG	Risk Owner	Latest update
12	1, 2	If diving is included within the facilities mix then there will be a decreased management fee from a leisure management contract, leading to loss of income to the council and potential inability to pay back the prudential borrowing required.	Ongoing financial modelling to understand realistic expectations of management fee and council requirements.	Open	02/09/2016	Financial	12	A	Dawn Wakeling	10/11/16: Feasibility work has identified an estimated reduction in management fee of ~£120k for Option 1, ~£183k for Option 2, subject to procurement
13	1,2	If diving is included within the facilities mix, it may be difficult to recruit the coaches required, leading to inability of the leisure provider to provide the desired programme of diving and synchronised swimming activity	Early engagement with leisure bidders if decision is taken to include diving in the facilities mix, to understand likelihood and potential mitigation	Open	15/10/2016	Business Continuity	8	G	Cassie Bridger / Leisure operator	
14	2	If option 2 is selected, it may not be possible to adequately re-site the Mill Hill Rugby Club pitches and run off areas, leading to a requirement to find an alternative location for the pitches	Further analysis of impact to site required	Open	14/11/2016	Business Continuity/ Reputational	12	A	Dennis Holmes	

### 13. Sources

- Saunders Boston – design development.
- *SPA Development Project – Barnet Copthall Diving Feasibility Report (Design Options and Implications)* – October 2016 –
- *London Borough of Barnet – Diving at Barnet Copthall Leisure Centre* – November 2016 – The Sports Consultancy
- Data provided by Greenwich Leisure Limited (GLL) in relation to participation, programming, expenditure and income.
- Data provided by Barnet Copthall Swimming Club in relation to participation, programming, expenditure, income and competitions.
- Data provided by #SaveBarnetDiving petition group in relation to participation, programming and operations.

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	<p><b>Policy and Resources Committee</b></p> <p><b>1<sup>st</sup> December 2016</b></p>
<p style="text-align: right;"><b>Title</b></p>	<p><b>North Finchley Town Centre Area Framework SPD</b></p>
<p style="text-align: right;"><b>Report of</b></p>	<p>Cath Shaw – Commissioning Director, Growth and Development</p>
<p style="text-align: right;"><b>Wards</b></p>	<p>Woodhouse and West Finchley</p>
<p style="text-align: right;"><b>Status</b></p>	<p>Public</p>
<p style="text-align: right;"><b>Urgent</b></p>	<p>No</p>
<p style="text-align: right;"><b>Key</b></p>	<p>Yes</p>
<p style="text-align: right;"><b>Enclosures</b></p>	<p>Appendix 1 - Executive Summary - High Street Revivals: North Finchley Appendix 2 - Draft Heads of Terms</p>
<p style="text-align: right;"><b>Officer Contact Details</b></p>	<p>Kathryn Randall, Head of Business, Employment and Skills <a href="mailto:kathryn.randall@barnet.gov.uk">kathryn.randall@barnet.gov.uk</a></p>

## Summary

The decline of the high street is well-recognised, and in common with other localities, Barnet’s high streets face challenge from technological changes, macroeconomic forces, and changes in consumer behaviour.

A number of reports have been published which chart the reasons for the decline of the high street, including the impact of internet shopping and high street shop closures, in the face of the competitive appeal of well-curated retail offers from shopping centres.

In 2009, Barnet Council proposed a North Finchley Town Centre Framework which highlighted a number of proposals to address these concerns.

While not adopted at the time, the Framework has informed a proposal by Joseph Partners; who have proposed a four-point action plan to revitalise the North Finchley High Road. This action plan involves redefining the high street area; acquiring space in order to provide a critical mass of properties to allow the active curation of consolidated retail space; identifying and implementing an appropriate usage mix in order to create a vibrant and attractive location; and intensifying usage of spaces which currently exist on the periphery

of the high street to support North Finchley's ongoing prosperity.

To initiate the proposal, this report proposes that the Council as landowner enters into an exclusivity agreement (termed a "Preliminary Agreement") with Jonathan Joseph (trading as, and referred to in this Report as, Joseph Partners), to enable, in the first instance, development of a draft Supplementary Planning Document designed to provide the necessary statutory framework, and in doing so, to facilitate future redevelopment. The exclusivity period within the Preliminary Agreement will relate to the Council's land interests and not to the Council's role as Local Planning Authority.

## **Recommendations**

- 1. That the committee authorise the Commissioning Director, Growth and Development, to prepare a draft Supplementary Planning Document (SPD) for North Finchley Town Centre Area Framework, to come back to Policy and Resources Committee for approval for consultation and (if considered appropriate) subsequent adoption.**
- 2. That the committee agree the draft Heads of Terms substantially as shown in Appendix 2, and delegate authority to the Commissioning Director, Growth and Development to finalise the detail of the draft Heads of Terms, sign the Heads of Terms and then negotiate and enter into the Preliminary Agreement envisaged by the draft Heads of Terms, in consultation with the Chairman of the Assets, Regeneration and Growth Committee.**
- 3. That the committee note that the draft Heads of Terms and then the Preliminary Agreement will include exclusivity periods (not to enter into any other agreement or arrangement with a third party) in relation to the sale or disposal of the Council's land at North Finchley High Street (exclusivity period 4 months after signing Heads of Terms, and then 2 years from signing the Preliminary Agreement, capable of extension in pre-agreed circumstances, subject to an overall longstop date to be agreed by the Commissioning Director, Growth and Development, in consultation with the Chairman of the Assets, Regeneration and Growth Committee).**

### **1. WHY THIS REPORT IS NEEDED**

- 1.1 The decline of the high street is a well-recognised problem in the United Kingdom. Many areas struggle to adjust to the impact of new technologies, changes in consumer behaviour, and pressures from external macroeconomic conditions. In common with other high streets, Barnet's town centres face similar challenges.
- 1.2 In response, Entrepreneurial Barnet 2015 – 2020 sets out the approach towards encouraging diverse, distinctive town centres with a sustainable mix of retail, leisure, business and residential uses. As part of this approach, Barnet Council provides the Town Centre Offer, which outlines the assistance which can be provided, depending on the categorisation of the town centre as a Main, District or Local town centre. North Finchley is one of seven main

town centres within the borough. The assistance provided to main town centres includes encouraging the ownership of the town centre by our Town Teams; supporting the Night-Time economy; and offers in relation to markets and street trading. The Town Centre Offer also provides funding and project management support in relation to major projects within the town centre, such as the Burnt Oak project.

- 1.3 Crucially, the Town Centre Offer also provides for active marketing and promotion of opportunities for developers. This is an important tool for improvements in the high street, as it allows for additional investment and development in the area, other than by the Council, which in turn supports local businesses and residents.
- 1.4 To date, a number of reviews have analysed the state of high streets within the UK, such as the Portas Review (2011), Town Centre Investment Management (2013), and the Grimsey Review (2013). These reviews outlined a number of key conclusions:
  - High streets in the UK have grown too long, diluting their impact and attractiveness.
  - High streets require a mixture of uses in order to be successful, such as the creation of community hubs in addition to retail. Retail offerings alone are unlikely to secure a high street's survival.
  - High streets suffer from barriers which prevent curation of the character of the town centre and retail offering, leaving them at a competitive disadvantage to shopping centres. These barriers include lack of control of real estate, and therefore inability to manage the quality and character of the retail mix.
- 1.5 The High Street Revivals: North Finchley proposal, created by Joseph Partners (see copy at Appendix 1), outlines an innovative approach to North Finchley designed to address these key issues by creating a curated high street, which manages the occupancy of the high street to ensure that the optimal mix of independent and brand name retailers is present in the area. This proposal is largely in line with the key recommendations presented through the 2009 area framework proposal, however also seeks to create a curated high street through a critical mass of ownership and key policies of ownership.
- 1.6 Joseph Partners proposes a four-point action plan to address the key challenges facing high streets, outlined in more detail in Appendix 1:
  - Redefine the high street by researching, consulting and defining the sustainable core of the area.
  - Establish a context for change, involving comprehensive regeneration either through acquisition, or by agreements with existing landowners.
  - Curate the occupancy of the core high street over a minimum period of 3 – 5 years, bringing in desired and needed tenants and utilising

landlord control to incorporate flexible lease terms to encourage attractive and sustainable occupancy.

- Intensify and repurpose the periphery of the town centre to provide additional housing adjacent to the town centre, integrating high-quality residential uses into the upper parts of retained shopping areas, and providing the ability to carry out significant public realm improvements.

- 1.7 North Finchley has been identified as an ideal candidate for adopting this particular approach. The 2009 North Finchley Town Centre Planning Strategy was created as a consultation document to facilitate the creation of a Town Centre Framework for North Finchley. Whilst the town centre framework was not progressed in 2009, indicators within North Finchley suggest it is beneficial to revisit the proposal in the form of a North Finchley Town Centre Area Framework Supplementary Planning Document (SPD) for the high street.
- 1.8 The 2009 North Finchley Town Centre Planning Strategy identifies three distinct character areas within North Finchley: the northern zone, which is dominated by commercial space and housing; the central zone which provides a mixture of shops and restaurants; and the southern zone which contains the Arts Depot and the North Finchley gyratory.
- 1.9 North Finchley town centre is Barnet's third largest centre in terms of commercial floorspace, and enjoys the second highest financial turnover in the town centre network. The centre is focussed along the High Road (A1000), and is linear in form. It has a variety of independent and also some well-known high street multiples and is also categorised as one of Barnet's main town centres. Within the town centre, vacancy rates have been steadily rising since 2003 and North Finchley is the only town centre in Barnet to have seen a consistent increase in vacancy rates over this time period, from 3.7% in 2003 to 12% in 2016. As such, the intervention of a proposal of this type should provide a positive direction for the high street.
- 1.10 Utilising a Town Centre Investment Management approach in North Finchley will provide refreshed retail and leisure uses in a consolidated area as well as driving forward other corporate priorities, particularly in providing additional housing within the borough.
- 1.11 To facilitate the revival of the High Road, it is proposed to create an SPD which provides the framework to progress future development proposals at North Finchley town centre and the immediately adjacent area providing an additional mechanism to support this town centre area.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 The challenge to high streets continue to rise with competition from new technology and increasing demands for convenience from consumers.

- 2.2 North Finchley town centre exhibits early indicators of difficulty in its high street. Within the town centre, vacancy rates have been steadily rising since 2003 and North Finchley is the only town centre in Barnet to have seen a consistent increase in vacancy rates over this time period. Permitted development rights have also had an impact on the town centre, with a total of 2,693m<sup>2</sup> of office floorspace lost to 80 residential units. As such, the intervention of a proposal of this type provides a positive direction for the high street.
- 2.3 North Finchley is a particularly long and linear High Street and retail offerings can be strengthened by consolidating the locations of these offerings and creating a curated core offering. Coupled with development of the periphery of the high street, the approach will provide a higher quality retail experience as well as additional residential space.
- 2.4 The creation of a North Finchley Town Centre Area Framework SPD will provide the scope to gather additional evidence to make recommendations on the shape of proposed developments within the town centre and support the ongoing prosperity of the North Finchley Town Centre. The creation of the SPD will allow for the framework to exist in planning terms and provide a document which can be considered during the review of the Local Plan in 2017. It will also provide for the opportunity to reassess the boundaries of the town centre and its best retail mix, and identify the requirements for employment space within the high street.
- 2.5 Joseph Partner's proposal builds on the principles of the draft North Finchley town centre framework and provides a strong vision and ambition to augment the high street in an innovative way.

### **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 The alternative option to these recommendations is not to enter into the Preliminary Agreement with Joseph Partners, and to either self-fund or refrain from implementing a North Finchley SPD at this time.
- 3.2 Under both of these offers however, there is low confidence that the approach would be successful due to a lack of demonstrable market interest to date.

### **4. POST-DECISION IMPLEMENTATION**

- 4.1 Following approval of the recommendations, officers will progress the creation of a draft Supplementary Planning Document for North Finchley.. This would include working up a programme of timescales for the SPD.
- 4.2 The Council will enter into the heads of terms substantially in the form outlined in Appendix 2.

### **5. IMPLICATIONS OF DECISION**

#### **5.1 Corporate Priorities and Performance**

- 5.1.1 The proposals in Entrepreneurial Barnet relating to town centres directly support delivery of the Corporate Plan 2015-2020, particularly the following

stated corporate priority:

- Promote responsible growth within the Borough, encouraging development and success, revitalising communities whilst protecting what residents love about the Borough.

5.1.2 Entrepreneurial Barnet 2015 – 2020 outlines Barnet’s approach to supporting the local economy to grow, and developing a successful, growing suburb in a successful, growing world city.

5.1.3 Within Entrepreneurial Barnet, the Town Centre offer framework specifically outlines the Council’s commitment to provide additional support to actively market and promote opportunities to developers, when dealing with main Town Centres. Creation of an SPD for North Finchley Town Centre will provide clarity around the town centre proposition for development and how to maximise the responsible growth in that high street to secure growth and employment opportunities in the face of growing challenges for high streets.

5.1.4 Additionally, the Housing Strategy 2015 – 2025 highlights the role of purpose-built private rented sector housing when located within or around town centres in addressing distinct housing needs as well as supporting labour mobility.

## 5.2 **Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

### 5.2.1 *Finance and Value for Money*

5.2.1.1 The adoption of the recommendations will result in no additional cost to the Council as a result of the proposal, as the cost of additional resources will be recovered from Joseph Partners through a Planning Performance Agreement (PPA), and statutory planning functions will continue to be delivered through the business as usual Re contract.

### 5.2.2 *Procurement*

5.2.2.1 The creation of the SPD may require the Council to seek resource support in order to develop the document. Should this additional need require consultant or third party support, the Council will follow existing procurement rules for the tendering and selection process.

### 5.2.3 *Staffing*

5.2.3.1 Additional staffing resource will be required to progress the recommendations towards an SPD. However, except to the extent that the cost of this resource would need to be incurred by the Council anyway (ie. in terms of planning officer/Council consultant time, if the Council (through planning officers/consultants) were working up a framework alone), this resource will be funded through the agreed terms outlined in Appendix 2 (see 6.5 and 6.6 of the draft Heads of Terms).

### 5.2.4 *IT, Sustainability, Social Value*

5.2.4.1 There are no anticipated implications in IT or sustainability in relation to the project outlined above.

### 5.2.5 *Property*

- 5.2.5.1 This report requests that the Committee approve for the Director of Resources to explore the potential to make Council land available for the development of North Finchley following creation of the SPD. Under the Preliminary Agreement the Council is under no obligation to sell any property.

## 5.3 **Legal and Constitutional References**

- 5.3.1 The Planning and Compulsory Purchase Act 2004 and the Town and Country Planning (Local Planning) (England) Regulations 2012 provide guidance on preparation and adoption of the Local Plan. Upon adoption, the draft SPD becomes a statutory Supplementary Planning Document that provides part of Barnet's formal planning policy framework. The Council is required under both statute and the regulations to ensure policy documents such as the SPD are up to date.

- 5.3.2 Annex A to Responsibility for Functions, the Policy and Resources Committee has the authority under para (2):

- “To be responsible for the overall strategic direction of the Council including the following specific functions/activities: Approve development of statutory Local Plan and related documents...”
- “Consider for approval and adoption....Supplementary Planning Documents and Planning Briefs”
- “If any report comes within the remit of more than one committee, to avoid the report being discussed at several committees, the report will be presented and determined at the most appropriate committee. If this is not clear, then the report will be discussed and determined by the Policy and Resources Committee.”

- 5.3.3 The costs of work on the Development Framework to be undertaken under the proposed Heads of Terms and Preliminary Agreement, apart from the statutory functions, can be recovered under a Planning Performance Agreement and/or the Preliminary Agreement.

- 5.3.4 Any landowner costs incurred by the Council in relation to the Development Framework are recoverable from the developer under the General Power of Competence, section 1 of the Localism Act 2011.

- 5.3.5 The Heads of Terms allow for an exclusivity period of:

- 4 months from the commencement date; and
- 2 years from when the parties enter into the Preliminary Agreement;

and provision to extend this, in pre-agreed circumstances with an overall longstop date to be agreed by the Council (that longstop date to be agreed by the Commissioning Director, Growth and Development, in consultation with the Chairman of the Assets, Regeneration and Growth Committee).

This exclusivity period, and the exclusivity arrangements, apply to any relevant Council land interests and not to the Council's Planning Authority role, which is unaffected.

5.3.6 The Preliminary Agreement to be entered into, once the form of this is agreed (and if, despite seeking to agree this, Council and Developer cannot reach agreement, either party can withdraw).

5.3.7 That an SPD is developed and consulted on by the Planning Authority, at Joseph Partners' cost, the Council engaging the staff/consultants.

5.3.8 Under the draft Heads of Terms, clause 7, it is only if:

- a) an SPD is drafted, agreed between Council (as a landowner) and Joseph Partners; and
- b) if the Council consider appropriate the SPD is put to Policy and Resources Committee for adoption; and
- c) the parties receive suitable legal advice that there is a reasonable case for site assembly, if necessary via compulsory purchase order;

that the other parts of the Heads of Terms would be engaged such as developing governance arrangements, and the parties using reasonable endeavours to agree forms of Site Assembly and Land Agreement.

5.3.9 However, the Heads of Terms do not oblige the Council to enter into the Land Agreement and Site Assembly Agreement unless the form of those documents is agreed, and relevant Council Committee authority is obtained (Heads of Terms, clause 8.3).

5.3.10 If the Land Agreement and Site Assembly Agreement are not, by the longstop date in 5.3.5. above, agreed, and Council authority obtained to enter into them, either party may end the Preliminary Agreement.

5.3.11 Under the Land Agreement and Site Assembly Agreement (Heads of Terms, clause 8.2):

- a) The Developer would seek planning permission for the Development; and
- b) Council officers would promote the Development and seek a Council resolution for a compulsory purchase order, if necessary for site assembly, and would acquire land and pass ownership to the Developer (at the Developer's cost). Any decision to make a compulsory purchase order is entirely at Council discretion (Heads of Terms, clause 8.4); and
- c) The Council's Assets Regeneration and Growth Committee would consider whether to sell its land to the Developer at market value, after usual development conditions precedent are satisfied, including (Heads of Terms, clause 9.1) the Developer obtaining planning consent and

securing site assembly (either by purchase or confirmed compulsory purchase order) as per a) and b) above, and demonstrating that it or its Council-approved funder has access to sufficient funding for the Development. However, as mentioned in 5.3.8 above, separate Council authority would be sought, to enter into the Land Agreement and Site Assembly Agreement, once these documents are agreed with the Developer.

5.3.12 Once the Land Agreement and Site Assembly Agreement are entered into, if the conditions precedent in 5.3.11 c above are not satisfied within 2 years from those Agreements being entered into (subject to potential extension of that 2-year period in pre-agreed circumstances, with an overall longstop date to be agreed by the Commissioning Director, Growth and Development, in consultation with the Chairman of the Assets, Regeneration and Growth Committee), either Council or Developer can terminate the Land Agreement and Site Assembly Agreement (Heads of Terms, clause 8.2.11).

5.3.13 Heads of Terms, clause 10.1 – whilst there is no contractual obligation on the Developer to carry out the Development, if the Developer does not start or finish the Development by longstop dates to be agreed, the Council may terminate the various agreements and re-acquire the Council land (and, if it wishes, any other land acquired by the Developer for the Development) at the price originally paid to the Council. This gives the Council a course of action if the Development is not carried out.

5.3.14 The Heads of Terms clause 13.2; The Council enters into these agreements as landowner not local planning authority and no commitment is given by the Council as local planning authority.

## 5.4 Risk Management

5.4.1 The key risks to the project are outlined below:

- , The creation of the North Finchley Town Centre Area Framework SPD will provide the opportunity to assess the evidence base for the proposal for Joseph Partners and to make recommendations in relation to future developments. The risk will be further mitigated through the extensive consultation that will take place as part of the SPD project.
- *Trader resistance* – There is a risk of resistance on the part of traders who already exist within the high street. The creation of an SPD provides an opportunity for all affected parties, including traders, to engage with the process, and Joseph Partners will appoint a communications agency who will lead on this engagement and communication work.
- *Failure to proceed* – There is a missed opportunity to improve the town centre.

## 5.5 Equalities and Diversity

5.5.1 As part of the development of the Entrepreneurial Barnet strategy, a full

Equalities Impact Assessment (EIA) was undertaken which informed the Town Centre offering. As the development of the SPD progresses, an EIA will be undertaken and equalities implications will be kept under review.

## **5.6 Consultation and Engagement**

5.6.1 The creation of a Supplementary Planning Document involves a significant aspect of consultation, both with members and with residents and businesses in Barnet. The Supplementary Planning Document will be subject to a thorough process of public consultation, in accordance with the Council's Statement of Community Involvement and including residents, traders and landowners.

5.6.2 The draft SPD will return to the Policy and Resources Committee prior to publishing for public consultation, and following the consultation will return to the Policy and Resources Committee for adoption.

## **5.7 Insight**

5.7.1 Initial data for the North Finchley high street has been taken from data collected as part of the annual monitoring of the high streets. Further evidence will be collected through the SPD process and this will inform the North Finchley Town Centre Area Framework SPD and the recommendations made in this SPD.

## **6. BACKGROUND PAPERS**

6.1 Entrepreneurial Barnet 2015 – 2020 outlines the council's commitment to ensuring vibrant High Streets within Barnet.

<https://www.barnet.gov.uk/dam/jcr:e326f566-5394-4a68-921c-5fee57541c9a/Entrepreneurial%20Barnet%202015-2020.pdf>

6.2 Barnet Housing Strategy 2015 – 2025

<https://www.barnet.gov.uk/dam/jcr:b49187f8-d93a-41c8-9f32-57e8f49a15ae/Approved%20Housing%20Strategy%202015%20to%202025.pdf>

## APPENDIX 1

### **Executive Summary of the Scheme**

**[ Appendix A has been prepared by Joseph Partners and presented to the Council. ]**

APPENDIX 2

Draft Heads of Terms

DATED

2016

JOSEPH PARTNERS

and

THE MAYOR AND BURGESSES OF THE LONDON BOROUGH OF BARNET

HEADS OF TERMS

in respect of a preliminary agreement for the proposed redevelopment of North Finchley  
High Street in the London Borough of Barnet

TEL: +44 (0)20 7524 6000

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## HEADS OF TERMS

DATE 2016

### PARTIES

- (1) JONATHAN JOSEPH (TRADING AS JOSEPH PARTNERS) of 5 Neville Court, Abbey Road, London NW8 9DD (the "Developer")
  - (2) THE MAYOR AND BURGESSES OF THE LONDON BOROUGH OF BARNET of North London Business Park, Oakleigh Road South, London N11 1NP (the "Council");
- each a "Party" and together the "Parties".

### RECITALS

- (A) The Developer has identified private sector retail led redevelopment schemes to regenerate a number of strategic high streets in the London Borough of Barnet by refocusing the current uses of these high streets and reducing the number of properties currently used for retail and creating new residential (including affordable) homes at either end of and above the properties where retail uses are retained in a newly regenerated high street and offering a diverse range of community uses, employment uses, retail, cafes and restaurants.
- (B) These Heads of Terms relate to the Developer's proposed scheme at North Finchley high street and the Parties (in their respective capacities as landowners) have agreed to work together on an exclusive basis in relation to this scheme (the "Scheme") including to prepare and (subject to agreeing the draft development framework) consult with owners, occupiers and residents about a development framework which will include options for the Scheme.
- (C) The Parties have agreed to work together on the basis as set out in these Heads of Terms to seek to conclude a preliminary agreement in relation to the Scheme (the "Preliminary Agreement") on the terms set out in these Heads of Terms.
- (D) In consideration for the mutual undertakings contained herein (although no reliance should be placed on the non-legally binding aspects), the Parties have agreed to enter into these Heads of Terms.

IT IS AGREED AS FOLLOWS:

## 1. DEFINITIONS AND INTERPRETATION

In these Heads of Terms including the recitals the following expressions shall have the meanings respectively assigned to them as follows:

“Commencement Date”

means the date of these Heads of Terms;

“Council Land:

means [insert details];

"CPO"

means any compulsory purchase order which may be required to be made and promoted by the Council under the provisions of Section 226(1)(a) of the Town and Country Planning Act 1990 as further detailed in these Heads of Terms to the extent that such an order may be necessary in accordance with the relevant statutory tests in order to acquire any Land Interests in order to enable the Scheme to proceed;

"Development Framework"

means the development framework for the Scheme to be developed by the Parties in accordance with clause 6.1;

“Exclusivity Periods”

means an initial period from the Commencement Date until the earlier of:

- (i) the date the Parties enter into the Preliminary Agreement; and
- (ii) the date four (4) months from the Commencement Date; and

a further period of two (2) years from the date the Parties enter into the Preliminary Agreement;

“Executive Summary”

means the executive summary of the Developer's proposals for the Scheme (which remain subject to agreement by the Council) prepared by Allies & Morrison Urban Practitioners dated November 2016;

“Heads of Terms”

means these Heads of Terms;

“Information Legislation”

means together the Freedom of Information Act 2000 and the Environmental Information Regulations 2004;

"Land Agreement"

means an agreement as described in clause 8, which (subject to obtaining the necessary Council authority to do so) the Parties may enter into in accordance with clause 8;

"Land Interests"

means the freehold and/or leasehold interest in or any lease or tenancy and/or any other interest the Properties or any new right created over land at the Properties or any part thereof in each case being land or an interest the acquisition of which is required to enable the development of the Scheme as further detailed in these Heads of Terms (except for any interest held by the Council);

"Leading Counsel"

means Queen's Counsel of at least 10 years call with relevant experience and expertise in planning law as reasonably agreed between the Parties;

"Legally Binding Provisions"

means the provisions of clauses 3, 4, 6.5, 6.6, 11 and 12;

"Outline Programme"

means the outline programme for the Schemes agreed between the Parties in accordance with clause 5;

"Preliminary Agreement"

means the preliminary agreement as described in recital C and as further detailed in these Heads of Terms, which is proposed to be entered into by the Parties after the expiry of the relevant challenge period for the Council's decision to enter into the Preliminary Agreement (without a challenge to such decision being made);

"Properties"

means the land together with the buildings or structures erected thereon required for the Scheme as shown for identification purposes edged red on the relevant Site Plan;

"Scheme"

means a proposed development scheme relating to the Properties, reflecting the outline principles in Recital (A) above further detail of which is to be agreed between the Council (in its capacity as a landowner of part of the Properties) and the Developer (the Developer's outline proposals for which are set out in the Executive Summary) as part of the Preliminary Agreement;

"Site Assembly Agreement"

means an agreement as described in clause 8, which (subject to obtaining the necessary Council authority to do so) the Parties may enter into in accordance with clause 8;

"Site Assembly Costs"

means any proper and reasonable costs (including purchase price, compensation and other necessary payments to landowners or other holders of Land Interests) to be incurred by the Council and/or the Developer as set out in the Site Assembly Agreement to be further detailed in the Preliminary Agreement;

"Site Plan"

means the indicative project boundary plan [annexed hereto] or such other plans as may be agreed by the Parties;

- 1.2 The following rules of interpretation apply to these Heads of Terms:
  - 1.2.1 In these Heads of Terms unless the context otherwise requires references to the singular shall embrace the plural and vice versa. References to persons shall include bodies corporate and vice versa and references to clauses shall be references to clauses of these Heads of Terms unless otherwise provided.
  - 1.1.2 References to statutes or statutory provisions include that statute or provision as amended modified re-enacted or replaced from time to time whether before or after the date hereof and to any previous statute or statutory provision amended modified re-enacted or replaced by such statute or provision.
  - 1.1.3 The clause and Schedule headings in these Heads of Terms are inserted for convenience only and shall not affect the construction of the provisions to which they relate.

## 2. COMMENCEMENT AND DURATION

These Heads of Terms shall take effect on the Commencement Date.

## 3. BINDING AND NON-BINDING PROVISIONS OF THESE HEADS OF TERMS

- 3.1 Subject to clause 3.4, the Legally Binding Provisions shall be legally binding from the Commencement Date.
- 3.2 Subject to the provisions of clause 3.1 no other provision of these Heads of Terms is legally binding in any way.
- 3.3 The Legally Binding Provisions of these Heads of Terms are subject to English law and subject to the jurisdiction of the High Court in England & Wales.
- 3.4 In the event that a legal challenge is made in respect of these Heads of Terms and/or in relation to any exclusivity created by these Heads of Terms, then the Developer shall not be entitled to, and shall not take any action to recover, any damages from the Council in respect of any breach of the Legally Binding Provisions.

## 4. EXCLUSIVITY

- 4.1 The Council shall grant to the Developer exclusivity (meaning that the Council will not sell or grant another long-term interest in the Council Land for the purpose of the Scheme or a similar scheme) for the Exclusivity Periods.

- 4.2 The Preliminary Agreement shall set out how the Exclusivity Periods may be extended in certain agreed circumstances, subject to an ultimate longstop date to be agreed between the Parties.
5. OUTLINE PROGRAMME FOR THE SCHEME
- 5.1 The Preliminary Agreement shall set out the Outline Programme for the Scheme and the Parties shall review the Outline Programme on a regular basis taking into account developments and progress with the Scheme and shall use reasonable endeavours to adhere to the same.
- 5.2 Prior to the Parties entering into the Preliminary Agreement the Developer shall provide reasonable evidence that he is able to fund preparation and finalisation of the Development Framework.
6. DEVELOPMENT FRAMEWORK
- 6.1 The Parties shall be jointly responsible for the preparation of the Development Framework for the Scheme (including seeking to agree the Scheme content between the Parties) and the Parties shall work together to consult appropriately with owners, occupiers and residents in relation to the Development Framework.
- 6.2 The purpose of the Development Framework shall be to establish:
- 6.2.1 whether there is a case for obtaining planning permission for the Scheme; and
- 6.2.2 a design framework in relation to the Scheme.
- 6.3 In preparing the Development Framework the Parties shall have regard to the fact that it may be necessary for the Council to consider (subject to clause 8.4 below) whether there may be a need to seek a CPO in relation to the Properties if this is necessary to enable delivery of the Scheme through the acquisition, redevelopment and regeneration of the Properties so as to rationalise existing retail and other uses and increase the residential offering.
- 6.4 The Parties anticipate that, for the Scheme to proceed it will be necessary for the Development Framework to be adopted as supplementary or other planning guidance by the Council as the local planning authority and the Preliminary Agreement will set out the procedure for reviewing and establishing the steps to be taken in this respect. For the avoidance of doubt the local planning authority's discretion shall not be fettered in terms of its ability to require changes to the draft Development Framework prior to its adoption.
- 6.5 The Developer shall meet the reasonable costs incurred by the Council in preparing the Development Framework as landowner rather than as the local planning authority and the Preliminary Agreement shall contain an agreed process for the Developer to approve such costs in accordance with the principles set out in clause 13.3 below, on the basis that once an approved cost is incurred it will be paid by the Developer.
- 6.6 In addition to meeting the reasonable costs incurred by the Council in preparing the Development Framework as landowner and subject to the local planning authority entering into a planning performance agreement in accordance with clause 6.9, the

Developer shall as part of the planning performance agreement agree to meet the planning authority's planning officer and other reasonable costs relating to the Development Framework and other supporting activities to be further detailed in the planning performance agreement. For the avoidance of doubt the local planning authority may proceed with the steps set out in clause 6.4 above, regardless of whether the Parties have agreed the content of the draft Development Framework.

- 6.7 The local planning authority shall employ the consultants required in connection with preparing, consulting on, and finalising the Development Framework, such consultants to be selected and appointed in accordance with the Council's internal procedures/standing orders and where applicable the Public Contract Regulations 2015. The Council shall use reasonable endeavours to procure that the planning authority consults with the Developer on the proposed selection and evaluation criteria for any consultants. The Developer recognises that the ultimate decision as to selection of consultants shall be with the Council as local planning authority.
- 6.8 The Developer shall (under these Heads of Terms and/or under the planning performance agreement referred to in clause 6.9) be responsible for any fees incurred by such consultants provided that the Council requires such fees to be met by the Developer and that such fees form part of a budget approved by the Developer in accordance with clause 13.3.
- 6.9 The Council shall if reasonably requested by the Developer support the Developer in seeking to procure that the local planning authority enters into a planning performance agreement with the Developer on terms to be agreed in relation to work on the Development Framework and any planning application for the Scheme to include (as far as permissible) activities in connection with the Development Framework (as far as within Council powers to recover them), support in respect of any public consultation and any pre-application studies or reports required.

## 7. ESTABLISHING THE CASE FOR SITE ASSEMBLY

- 7.1 Once the Development Framework has in accordance with clauses 6.1 to 6.3 been:
- 7.1.1 worked up by the planning authority and agreed by the Parties (at their respective discretions);
- 7.1.2 consulted on locally in accordance with clause 6.1; and
- 7.1.3 (if required) adopted by the local planning authority as supplementary or other appropriate planning guidance

the Parties shall jointly instruct (at the Developer's cost) Leading Counsel to provide advice on the Scheme and on the chances of obtaining a CPO confirmation in relation to the Properties insofar as it may prove not possible to achieve site assembly by private treaty within a reasonable period of time.

- 7.2 The specific advice to be requested from Leading Counsel, which shall be required in order to meet the requirements of clause 8, shall be further detailed in the Preliminary Agreement.

## 8. SITE ASSEMBLY AGREEMENT AND LAND AGREEMENT

- 8.1 Subject to the:
- 8.1.1 case for site assembly having been established in accordance with clauses 7.1 and 7.2; and
  - 8.1.2 the case for planning having been established via the Development Framework in accordance with clauses 6.1 to 6.3; and
  - 8.1.3 the Developer procuring that a funder with a suitable combination of financial resources and funding/access to funding (as reasonably approved by the Council) to fund the carrying out of the Scheme, enters into the Site Assembly Agreement and the Land Agreement in addition to the Developer so as provide committed funding to enable the Developer to comply with its obligations under the Site Assembly Agreement and the Land Agreement.

(in each case) to the Parties' reasonable satisfaction, then the Parties will use reasonable endeavours to agree the form of a Site Assembly Agreement and a Land Agreement in relation to the Properties (reflecting clauses 8.2 and 9) as soon as is reasonably practicable.

- 8.2 The Site Assembly Agreement and the Land Agreement shall include the following provisions:
- 8.2.1 The Developer shall be required to seek a satisfactory planning consent for the Scheme;
  - 8.2.2 Subject to clause 8.4 the relevant Council officers shall promote the Scheme within the Council and if necessary, seek resolution(s) from the relevant committee of the Council as required in relation to site assembly and (as required) CPO in relation to the Properties;
  - 8.2.3 Subject to planning consent being obtained, the Council and/or the Developer (as appropriate) shall seek to ascertain ownership of all relevant Land Interests and shall progress discussions with owners of such Land Interests to acquire their Land Interests. The Developer shall where appropriate (either itself or through the Council) acquire Land Interests which become available, when it is appropriate to do so;
  - 8.2.4 The Developer shall be responsible for the Site Assembly Costs and shall provide a form of security for the Site Assembly Costs to the Council in a form acceptable to the Council (acting reasonably and without delay);
  - 8.2.5 Prior to the Council acquiring any Land Interests, the Developer shall demonstrate to the Council's reasonable satisfaction that the Developer has secured the funding required to carry out the Scheme;
  - 8.2.6 Subject to demonstrating that satisfactory planning, site assembly and funding are in place, in accordance with clauses 8.2.1 to 8.2.5, the Council shall sell to the Developer the Council Land at its open market value (as agreed between the Parties or (failing agreement being reached) ascertained by an independent third party acting as an expert or arbitrator (such third party's identity, capacity and terms of reference to be set out in the Land Agreement, and the reasonable costs of such appointment being met by the Developer)).

- 8.2.7 The Council shall as part of the Site Assembly Agreement and the Land Agreement be entitled to an overage or share of the profits in relation to the Scheme on terms to be agreed between the Parties.
- 8.2.8 If the Scheme is carried out, it shall be done in accordance with a design framework agreed between the Council and the Developer.
- 8.2.9 The Parties will work together to develop appropriate governance arrangements for the Scheme, to be included in the Site Assembly Agreement and Land Agreement, with a view to ensuring long-term Council and community influence over the town centre offer at North Finchley as part of the Scheme.
- 8.2.10 The Developer shall give the Council an option to purchase some of the residential units created as part of the Development at market value on terms to be agreed between the Parties.
- 8.2.11 There shall be an initial two (2) year longstop date to satisfy all conditions precedent to the Site Assembly Agreement with an entitlement for the Developer to extend this date in agreed circumstances subject to an overall long stop date to be agreed between the Parties.
- 8.3 Once the Site Assembly Agreement and the Land Agreement are substantially agreed between the Parties, the relevant officers of the Council shall as soon as reasonably practicable recommend these documents for approval of the Council (or of the relevant Council committee as appropriate) and (subject to that authority being obtained) the Parties will (after expiry of the relevant challenge period for such authority being granted, without a successful challenge being made), enter into the Site Assembly Agreement and the Land Agreement in the agreed form.
- 8.4 Notwithstanding any other provisions of these Heads of Terms, the question of whether the Council resolves to make a CPO shall be and remain at the absolute discretion of the Council.

## 9. LAND ACQUISITION AND LAND AGREEMENT

9.1 Subject to the:

- 9.1.1 the Developer securing a satisfactory planning consent in relation to the Scheme;
- 9.1.2 the Land Interests having been acquired or secured under the terms of the Site Assembly Agreement;
- 9.1.3 the Developer demonstrating that it has sufficient funding to carry out the Scheme; and
- 9.1.4 the Parties satisfying any other conditions precedent to enable the Scheme to proceed:
- (a) the Developer shall:
- (i) acquire from the Council any Land Interests; and

- (ii) pay all Site Assembly Costs and other compensation and costs (including reasonable costs of the Council) in connection with the Council implementing the Site Assembly Agreement;
- (b) the Council shall pursuant to the Land Agreement sell to the Developer the Council Land at its open market value (as agreed or determined in accordance with clause 8.2.6.)

## 10. TERMINATION

10.1 In the event that the Developer has not commenced substantial works relating to the Scheme by an agreed longstop date, or completed the Scheme by a later agreed longstop date, to be agreed, then the Council may on written notice to the Developer:

10.1.1 terminate the exclusivity and the various agreements described above; and

10.1.2 may at its option require the Developer to transfer any land acquired by the Developer relating to the Scheme, or (if the Council so elects) only the Council Land, to the Council or as directed by the Council at the price paid for such land by the Developer (subject to this not exceeding the open market value of those properties).

10.2 In the event that either Party commits a material breach of these Heads of Terms the other Party may on written notice terminate these Heads of Terms and such termination shall take effect from the date fourteen (14) days after the service of such written notice unless the Party in default remedies such breach to the reasonable satisfaction of the other Party.

## 11. CONFIDENTIALITY

11.1 It is intended that these Heads of Terms shall be fully disclosed by the Council to the public in connection with the approval of the Council (or relevant Council committee) to enter into these Heads of Terms and the Preliminary Agreement. The Preliminary Agreement shall also be fully disclosed to the public, including the Executive Summary. However, any other elements of the Developer's design proposals shall remain confidential and shall not be disclosed to any third party, other than appointed advisers in respect of the Scheme or as required by the Information Legislation, or otherwise as necessary to enable preparation and agreement of the Development Framework.

11.2 Where a request is received by the Council under the Information Legislation in connection with the design of the Scheme it shall consult with the Developer and shall have regard to any representations made by the Developer (including on the use of any exemptions under the Information Legislation) provided always that the final decision of whether to release any information shall rest with the Council.

11.3 Neither Party shall make, or permit any person to make, any public announcement concerning the Scheme, without the prior written consent of the other Party (such consent not to be unreasonably withheld or delayed) except as required by law or any competent authority.

## 12. NO PARTNERSHIP OR AGENCY

12.1 Nothing in these Heads of Terms or in any document referred to in it shall be deemed to constitute a partnership or agency relationship between the Parties or any other person.

12.2 Save as expressly provided in these Heads of Terms, the execution, completion and implementation of these Heads of Terms shall not confer on either Party or any other person any power to bind or impose any obligations on the other Party.

### 13. GENERAL

13.1 Any notice served under or in connection with these Heads of Terms must be in writing and shall be deemed to be validly served if served either personally or by sending it through the post in a registered letter addressed to the last known registered office of the party to whom the notice is addressed.

13.2 The Council enters into these Heads of Terms, and shall enter into the Preliminary Agreement, Site Assembly Agreement, and Land Agreement, in its capacity as a landowner and not in its capacity as local planning authority or otherwise as a statutory authority, and no commitment is given by the Council in its capacity as local planning authority or otherwise as a statutory authority.

13.3 The Developer will pay the Council's reasonable and evidenced out of pocket costs (including reasonable and justified internal officer costs) in connection with finalising and entering into:

13.3.1 these Heads of Terms; and

13.3.2 the Preliminary Agreement; and

13.3.3 subject to clauses 6.6 to 6.9 the local planning authority's costs in connection with the preparation of Development Framework; and

13.3.4 the Site Assembly Agreement and Land Agreement and of complying with the Council's obligations under clauses 6, 7, 8 and 9 of these Heads of Terms, and of agreed provisions of the Site Assembly Agreement and Land Agreement;

subject to the prior approval by the Developer of a budget to be provided and updated by the Council on a monthly basis, such approvals not to be unreasonably withheld or delayed. For the avoidance of doubt the Council will not be obliged to take any action to the extent that it does not have Developer's approval to a budget for the relevant costs.

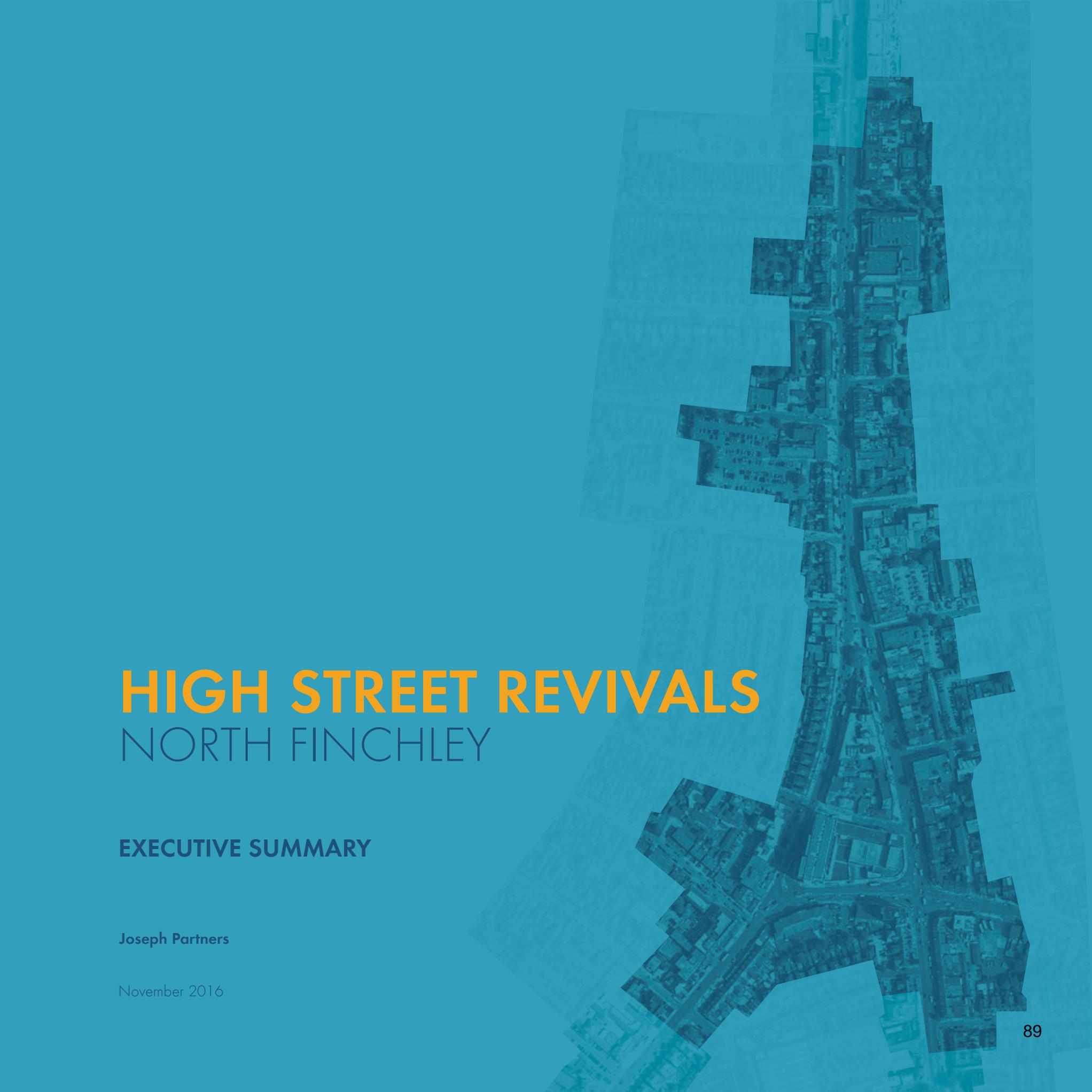
13.4 Unless expressly stated nothing in these Heads of Terms creates any rights in favour of any person pursuant to the Contracts (Rights of Third Parties) Act 1999.

13.5 No amendment or modification of these Heads of Terms shall be valid or binding on any Party unless the same is made in writing, refers expressly to these Heads of Terms and is signed by its duly authorised representative.

13.6 These Heads of Terms shall be governed by and construed in accordance with the law of England and Wales.



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An aerial photograph of North Finchley, London, showing a dense urban grid with streets and buildings. The image is semi-transparent and serves as a background for the text.

# HIGH STREET REVIVALS

## NORTH FINCHLEY

### EXECUTIVE SUMMARY

Joseph Partners

November 2016

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Joseph Partners  
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# 1 INTRODUCTION



## 1.1

# BACKGROUND

### Summary

The decline of the British High Street is a much lamented problem – with very few effective solutions provided to date. However, a significant number of high streets are perfectly capable of being revived – but there is no easy solution – despite a number of people and institutions having worked hard to find one.

The challenge of how to revive declining high streets can be distilled into three primary, but rectifiable problems. The primary problems are briefly explained in the following pages and a statement on how to deal with the future rebuilding of high streets into attractive facilities follows.

The concept is being promoted by Jonathan Joseph, an experienced regeneration developer and development manager who has been responsible for creating some of the largest regeneration projects in the United Kingdom – together with his experienced professional team.

### Background

The Joseph Partners Team has spent the last 18 months closely examining the state of high streets in Britain and has concluded that a comprehensive approach must be adopted to deliver successful regeneration. Current initiatives are not working.

This section of the report explores some of the current issues and challenges faced by High Streets.

A number of high profile reports have attempted to distil the particular challenges which face high streets and to identify measures and interventions to address decline.

Many high streets are struggling to keep up with the impact of new technologies and shopping formats. Up to 150 million sq ft (20%) of current retail space across the UK is potentially surplus to modern retailing requirements in its current form (BCSC, 2012). 25% of UK retail sales are estimated to go to online channels by 2020 (BCSC, 2012). This may prove to be an underestimate.

These issues have been exacerbated by a prolonged retail downturn which has negatively impacted on both public and private investment. Brexit will not help to reverse these problems.

### **A new model for High Street revival**

Many Local Authorities have tried to kick-start this process through environmental improvements and town centre management initiatives. Whilst these are often of some benefit, they only take things so far and are unlikely to achieve real and sustainable change.

Following extensive research, we have focused on proposals for North Finchley which presents a number of opportunities for regeneration.

Our revitalised town centres will not only include refreshed retail and leisure uses but will also include other regenerative uses including flexible workspace, cultural uses and services, creating a viable, vibrant and sustainable high street to serve the needs of the local communities into the future.

### **Reasons for working with the Joseph Partners team**

The reasons for working with the Joseph Partners team are primarily the quality and experience of its team members. No claim is made as to whether the individuals or companies are better than anyone else, or that their skills are unique, but we are confident that the assembled team is easily as good as any other that could be assembled and that the individual components have all been selected to contribute to the overall

competence of the team in delivering the project.

The advantage of this particular team is that they have all worked closely together in the past on complex projects within the London Borough of Barnet and understand and trust not only each other but also the dynamics within Barnet that will influence the successful delivery of the project.

The Joseph Partners Team consists of the following key members:

- Jonathan Joseph - Joseph Partners
- Allies and Morrison Urban Practitioners
- Martin Fleishman - Consultancy International
- Nabarro
- Strettons Chartered Surveyors

Further details of each company are available on request.

## 1.2

# RESPONDING TO KEY ISSUES

### KEY ISSUES

Our research has indicated three principal issues and challenges for typical town centres and high streets.

#### 1. The Length of High Streets



High Streets have generally grown too long, usually based on an over-optimistic view by developers and tenants over many years. Their physical extents have drifted from their historic fundamental areas of focus into unwieldy and very weak retail pitches on the fringes – diluting impact and attractiveness.

This could be rectified through careful studies of the ideal, contemporary high street, pedestrian desire lines, transport arrangements, and a substantial refocus on what is important for local people - which is likely to involve less comparison retail and more leisure and specialist retail uses.

#### 2. Control of Real Estate



The reasons for declining high streets are many and varied. Key issues include changing shopping patterns, changing types of consumer demand and a perceived lack of general shopping convenience. However, consistent surveys by organisations such as the GLA (via the Mayor's Outer London Commission) and others have shown that residents in surrounding areas appear to continue to value high streets for convenience shopping and some services. In parallel, there is a desire to see a better quality and variety of tenants who would provide attractive facilities – particularly leisure. However, there is currently no mechanism to enable comprehensive change.

Most high streets have very fragmented ownership and initiatives such as those promoted through the Portas Review (primarily marketing based) simply do not work without a common purpose amongst owners. Owners tend to concentrate exclusively on their own properties in order to achieve the highest capital value. This is generally secured by aiming to let their premises to the best financial covenant available, for the longest period of time and it does not matter to the landlord whether the tenant is a chain coffee shop, a betting shop, or something useful to the community.

#### 3. Managing quality and character



A legacy of public sector funding cuts is a lack of investment in the public realm. Too many High Streets feel unloved and are characterised by cluttered, tired public realm and streetscape. This has a detrimental effect on customer perception and loyalty. In addition, attractive historic fabric is neglected and should be revealed, with shopfronts and upper floors sensitively refurbished.

## THE ACTION PLAN

We have developed a four point action plan which responds to the immediate challenges.

### 1. Redefine the High Street



Research, consult and define the sustainable core of the target high street – where its limits should be, whether there is core demand for specific retail and other services and what form they might take. We will work closely with the local community to develop the concept.

### 2. Establish a context for change and comprehensive regeneration



Gain control of the freeholds in the high street through acquisition, and/or by joint venture with existing landowners. Regeneration comprising new development plots and comprehensive works, refurbishment, extension of retained frontages to deliver a step change in the offer and quality of the high street and its environment.

### 3. Curate spaces



“Curate” the occupancy of the core high street over a minimum period of 3-5 years (but always thereafter), bringing in desired and needed tenants and utilising Landlord control to incorporate flexible (and even discounted) lease terms, to encourage attractive and sustainable occupancy and community uses.

### 4. Intensify and re-purpose the periphery



Redevelop peripheral areas to provide much needed housing adjacent to the town centre, integrate high quality residential uses into the upper parts of retained shopping areas and carry out a significant level of public realm improvement, including works to shop fronts and signage. This will often include bringing adjoining areas into beneficial use. Concentrate on rationalising essential and convenient car parking to benefit both residents and retailers.

2

NORTH FINCHLEY

CONTEXT

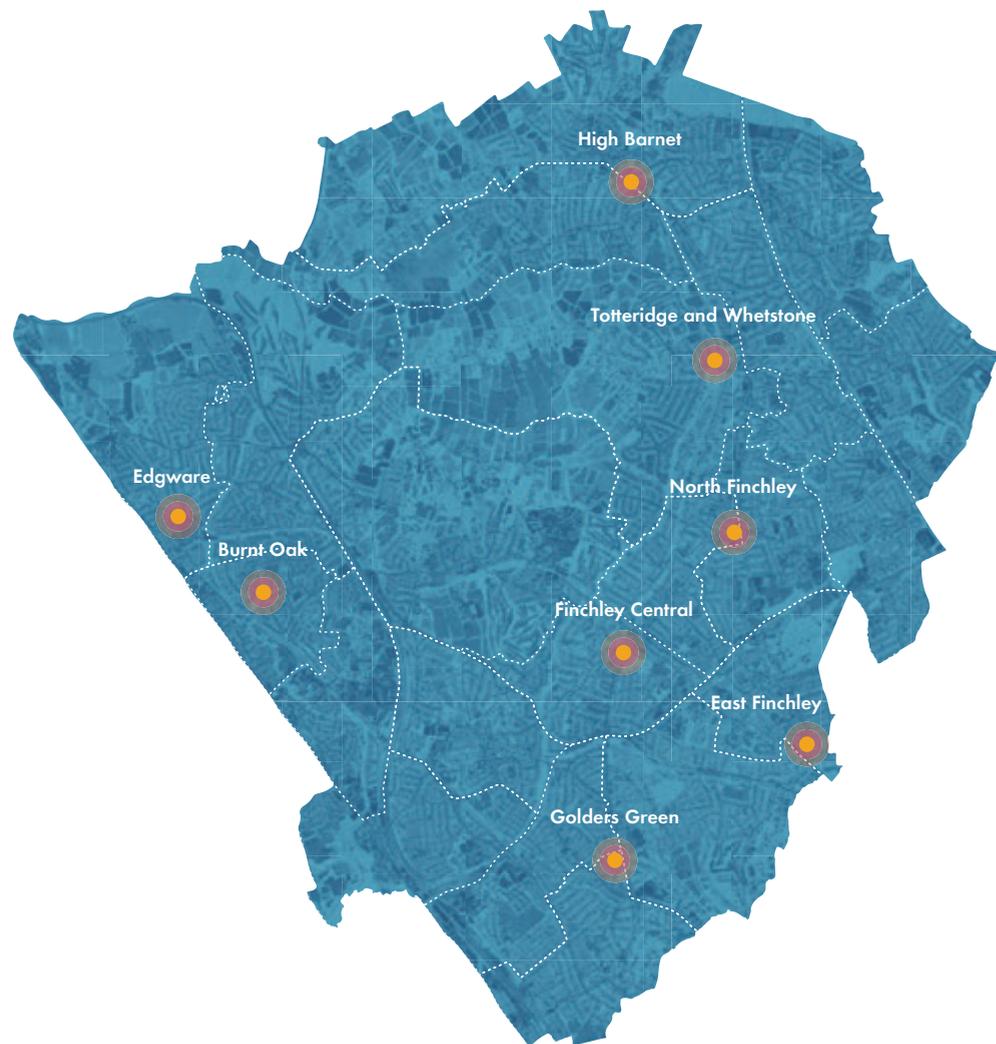
## 2.1

# LOCAL CONTEXT

### Town centres

The adjacent drawing highlights the location of the Borough's key District centres which sit below the Metropolitan scale Brent Cross centre in the shopping hierarchy.

North Finchley town centre is the London Borough of Barnet's third largest centre in terms of commercial floorspace. It also enjoys the second highest financial turnover in the town centre network. The centre is focussed along the High Road (A1000) and is linear in form. The centre has a variety of independent and also some well-known high street shops and is currently well used by shoppers – although its streetscape is often bleak. A high level of occupancy disguises a mix of very weak retailing.



District centres in Barnet



Project area with existing elevations

— — Indicative Project Boundary





High Road/ Mayfield Av. **1**



**2** High Road/ Woodside Grove



Ballard's Lane north **3**



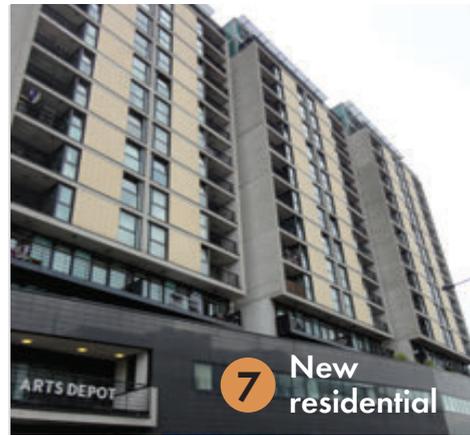
**4** Ballard's Lane south



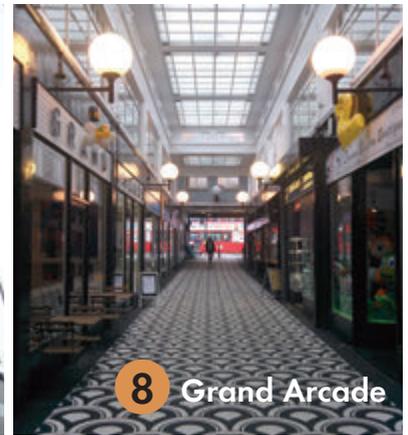
**5** Arts Depot building



Tally Ho public house **6**



**7** New residential



**8** Grand Arcade

Existing streets, buildings and spaces in the study area (see overleaf)

## 2.2

### PLANNING POLICY

A key component for the High Street Revivals strategy is the current generally supportive position in the local adopted planning policy framework.

In London, the regional planning policy position, alongside the National Planning Policy Framework (NPPF) provides a very supportive context for the package of interventions identified through the High Street Revival concept.

A more detailed review of local planning policies confirms a high degree of alignment with the emerging proposals.

We will work with LB Barnet to establish what further policy initiatives are required to establish an appropriately robust, comprehensive and explicit basis for future planning applications and acquisition strategies.

## 2.3

### APPROACH TO SITE ASSEMBLY

There is a need for a range of physical works and interventions to create new buildings and to carry out works to the retained properties which are to be refurbished, reconfigured and extended along the length of the High Street. Early engagement with existing landowners and the community will be vital.

Initial Land Registry searches have demonstrated that within the regeneration area the land ownership position is acutely fragmented. The initial search results to date reveal approximately 227 freehold and 285 leasehold interests within the regeneration, with very few registered freeholder owners owning more than one building / unit – and a maximum of 15% owner occupiers.

We will work with local land owners and the Council to establish a critical mass of freehold ownership.

# 3 NORTH FINCHLEY PROPOSALS



## 3.1

# STRATEGIC FRAMEWORK

### Our approach

The overall strategy and redevelopment options will be worked through and refined in consultation with local stakeholders and the Council and through discussion with local people:

### Spatial strategy

The key moves can be summarised as follows:

1. Retail activity should be concentrated along the High Road between the southern edge of the Arts Depot building and Lodge Lane / Torrington Park (i.e. one block south of Sainsburys). Depending on the exact extent, this might imply a modest reduction in the extent of retail frontage, and potentially an alteration in the town centre boundary.
2. There is potential to restructure traffic movements to allow the Arts Depot “island” to be anchored to the western “mainland”. A new public realm scheme along this section of Ballards Lane could be introduced, including a new market area.
3. A number of areas are identified as having potential for a comprehensive development strategy. A conservative assessment of residential capacity indicates that approximately 1,000 new residential units could be developed on these sites. It is assumed that frontages in the redefined retail core would continue to be in active A-class uses including a significant proportion of shops. Areas to the rear of the High Road or beyond the core extent of retail would be largely residential.
4. The ground floor and upper floors of the retained / refurbished High Street frontage has potential to be reconfigured in a mix of different uses. Alongside enhanced and more flexible retail floorspace at ground floor, upper floor residential uses could be reconfigured / extended with improved access, potentially with additional storeys of development above the shop units. There would be comprehensive physical regeneration involving not just new buildings but works to all existing buildings within the frontages that are to be retained to deliver a step change in the offer and quality of the high street and its public realm.
5. There is a severe shortage of new housing across London. High streets and town centres such as North Finchley provide an ideal location for high quality homes as they can accommodate relatively high densities in the context of high levels of public transport accessibility in town centres.

### **Key benefits**

The High Street Revival model brings the following key benefits:

- Affordability will underpin vitality: commercial rents will support independents and start-ups.
- Low cost space will be created for new ventures / community enterprises.
- Number of affordable homes in the centre will be increased.
- Together these will support the high street as a vibrant centre for its community.
- Independent businesses will be supported where appropriate and discussions with existing businesses will be initiated to secure engagement. Most occupiers will stay in the high street but often in refurbished or more suitable premises.
- Multiples will be re-arranged to support the better functioning of the centre.
- The number of homes in the centre will be increased significantly – creating much needed homes for local people, and supporting town centre vitality.
- The ability to create a comprehensively improved public realm.
- The enhancement of the retained frontages by physical improvements to all relevant frontage buildings and their reconfiguration / extension where appropriate.

## 3.2

### CURATION AND STEWARDSHIP OF USES

In addition to physical interventions, the project envisages a careful programme of curation. The curation and “re-base” of the high street is a unique opportunity. As noted in the introduction, the retail content of high streets has been decimated by a combination of supermarket competition, changing shopping patterns, physical degradation, high rents and inflexible leases. This can be reversed through our proposals.

There are examples where consistent ownership and stewardship has been largely effective – both in London (Marylebone High Street), Liverpool and Bath, and elsewhere, but these are rare.

A policy that improves the physical environment enables attractive leases to be offered to key tenants, will create a virtuous cycle of improvement, and ultimately lead again to modest rental growth.

Long-term stewardship is of crucial importance – the freeholder must be prepared to relinquish a proportion of current income in return for long term growth – and must work with the occupants to retain the new quality. The approach will also maintain room for organic growth – the conditions for flexible retail provision in response to market dynamics. This will be done in close association and partnership with the London Borough of Barnet whose participation in the long-term stewardship of the High Street is essential.

## 3.3

### REFURBISHMENT & INTENSIFICATION

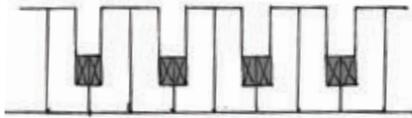
Parts of the high street environment at North Finchley are increasingly unsuitable for effective modern retail and residents. Access to flats is often through shared back lanes and can create an unsafe environment unsuitable for families, the elderly, and those with disabilities. Shops are often too small for modern retail uses and where food preparation may be involved are inflexible and environmentally unsuitable.

The adjacent case study illustrates how retained parts of the high street could be made to work more effectively for both its retailers and its residents.

The historic facade could be retained and refurbished maintaining the overall character. The fabric behind the facade could be removed and replaced by an adaptable development that houses modern retail facilities and accessible, good quality flats with properly planned building services. Service access would continue to be possible from the rear but the principal residential access will be placed on the high street, creating a more notable address and a secondary means of escape from the residential units. In addition, the high street would be inhabited for longer each day, increasing natural surveillance and activity along the street.



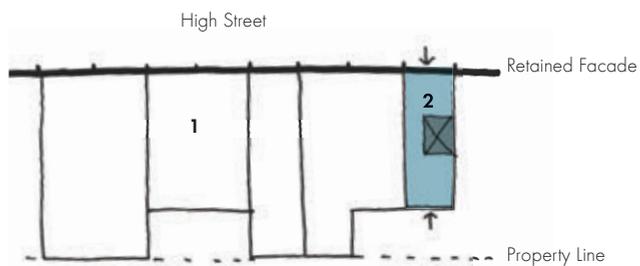
Existing street elevation



Existing plan of units (estimated and simplified)

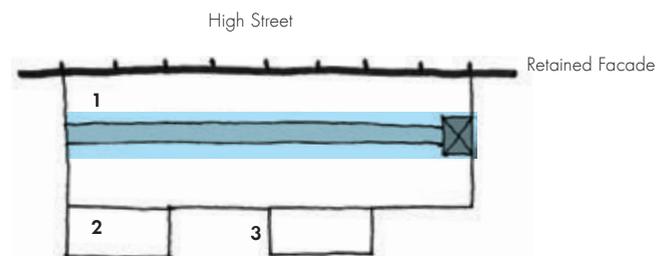


Proposed intervention



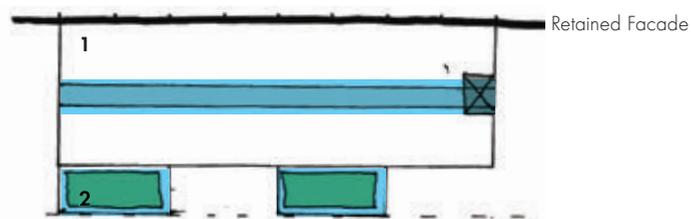
Indicative Ground Floor

- 1: Ground floors will be more flexible arranged in multiples of the typical 6m facade.
- 2: Residential entrance, with doors from the High Street and back lane



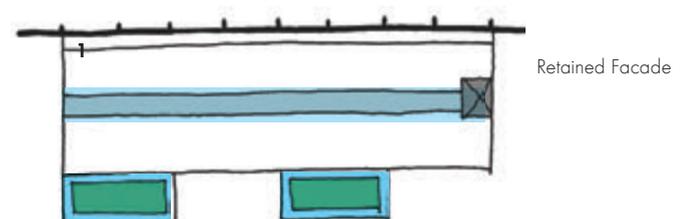
Indicative First Floor

- 1: A 16m depth allows for a double loaded corridor of single aspect units.
- 2: A mezzanine level to the rear creates storage for the retail units.
- 3: Opportunity to re-service the commercial space to allow modern, flexible and effective ventilation and extract of food uses



Typical Floor

- 1: Residential units
- 2: The roof of the retail storage allows for a roof terrace/garden



Fourth Floor

- 1: Additional storeys should be set back from the retained high street facade.



Proposed



## 3.4 PUBLIC REALM, MOVEMENT AND STREETScape

### New streets and spaces

There is potential to restructure traffic movements to allow the Arts Depot “island” to be anchored to the western “mainland”. A new public realm scheme along this section of Ballards Lane could be introduced, including a new market area.

The overall ambition is to encourage greater pedestrian priority and to create a first rate environment for local residents, retailers, shoppers and visitors.



Existing



Proposed



### **An excellent high street environment**

The adjacent illustration shows how a balanced approach to the retention of landmark buildings, refurbishment and re-configuration of ground floors and upper floor extension or redevelopment could transform the centre. In addition, we are keen to explore opportunities to upgrade the streetscape in tandem with innovative on-street parking strategies focusing on greater flexibility for 1 hour stay spaces.



**Existing**

## 3.5

# DELIVERING HIGH QUALITY HOMES FOR BARNET

The project will provide an opportunity to deliver a wide range of high quality homes for the Borough. We will focus on the creation of attractive streets and spaces with a diversity of typologies and a contextual approach to scale, massing, architecture and materiality.

The team is able to draw on a detailed knowledge of designing different types of housing including single private dwellings, terraced streets, stacked maisonettes, mansion blocks, courtyard-based perimeter blocks and towers.

It is acknowledged that this Report has been produced solely in accordance with Joseph Partners' brief and instructions and without any knowledge of or reference to any other parties' potential interests in or proposals for the Project.



	<p><b>Policy and Resources Committee</b></p> <p><b>1 December 2016</b></p>
<b>Title</b>	<b>Annual Procurement Forward Plan [APFP] 2017/2018</b>
<b>Report of</b>	Director of Resources
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	Yes
<b>Enclosures</b>	Appendix 1 - Annual Procurement Forward Plan 2017-18
<b>Officer Contact Details</b>	Elizabeth Stavreski, Head of Procurement <a href="mailto:elizabeth.stavreski@barnet.gov.uk">elizabeth.stavreski@barnet.gov.uk</a>  Susan Lowe, Business Partner, Corporate and Street Scene <a href="mailto:susan.lowe@barnet.gov.uk">susan.lowe@barnet.gov.uk</a>

### Summary

This report sets out the detail of procurement activity for 2017/2018 and where known for 2018/19 for approval

### Recommendations

**That approval be given to officers to proceed with procurement activity as presented in the Annual Procurement Forward Plan [APFP] 2017/2018 and where known for 2018/19**

**1. WHY THIS REPORT IS NEEDED**

- 1.1 Contract Procedure Rules allow that any proposed procurement action that is listed on the Annual Procurement Forward Plan approved by the Policy and Resources Committee for that financial year can take place without further committee approval.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 To comply with the Council's Contract Procedure Rules.
- 2.2 To avoid presentation of individual requests for approval to procure to various Council committees.

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 The only alternative action is to present individual requests to Policy and Resources Committee and other theme committees. This was rejected as being burdensome both to Council officers in preparing such reports and committee members in the time that would be required to consider them.
- 3.2 There is also a timing issue in that many of these procurements will need to start within weeks and it would not be possible to schedule individual approvals from relevant theme committees in time.

## **4. POST DECISION IMPLEMENTATION**

- 4.1 Officers will proceed as appropriate with the procurements listed.

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

- 5.1.1 The Annual Procurement Forward Plan (APFP) will enable the Council to maintain an accurate oversight of procurement activity across the full range of services and support more commercial and efficient procurement practices. The APFP supports transparency and drives achievement of the Council's strategic objectives as set out in the Corporate Plan 2015-2020. The council, working with local, regional and national partners, will strive to ensure that Barnet is a place:

- 1) of opportunity where people can further their quality of life
- 2) where people are helped to help themselves, recognising that prevention is better than cure
- 3) where responsibility is shared, fairly
- 4) where services are delivered efficiently to get value for money for the taxpayer

- 5.1.2 The Authority is a signatory to London Council's Procurement Pledge "to create jobs and training through its supply chain." Typically this will include a requirement of suppliers to:

- Recruit a percentage of the workforce locally, for example by advertising with local Jobcentre Plus.
- Create apprenticeships
- Offer a number of work placements to young people, graduates, or workless people.

- Offer additional training and qualifications opportunities to a percentage of their existing workforce.
- Work with their own supply chains to create additional opportunities.

## 5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1 The costs pertaining to the contracts contained within the Appendix to this report are contained within the individual service budgets of the Council.

5.2.2 Any savings proposals within these plans are monitored throughout the financial year by the Procurement Board.

## 5.3 Social Value

5.3.1 The Public Services (Social Value) Act 2012 requires that consideration is given for above threshold (£164,176) service contracts to secure benefits for the community, environment and value for money for the London Borough of Barnet as follows:

- a) how what is proposed to be procured might improve the economic, social and environmental well-being of the relevant area, and
- (b) how, in conducting the process of procurement, it might act with a view to securing that improvement.

5.3.2 The Council has extended the Social Value Act's requirements in its social value and sustainability policies to cover all procurement at the council, not just above threshold services contracts.

5.3.3 Consequently delivery units will be asked to confirm that the development of specifications for all proposed procurements have taken these requirements into consideration. It should be noted that such considerations could compromise the Council's ability to maximise the value for money it can achieve, so a balance will be sought wherever possible

## 5.4 Legal and Constitutional References

5.4.1 Constitution Responsibilities for Functions Annex A sets out the terms of reference of the Policy and Resources Committee including:

- To be responsible for the overall strategic direction of the Council including Corporate Procurement (including agreement of the Procurement Forward Plan and agreeing exceptions to CPRs).

5.4.2 The Council's Constitution (Contract Procedure Rules) sets out the authorisation process for entering contractual commitments. "Authorisation" is the approval required before quotations or tenders for supplies, services or works may be sought in accordance with Appendix 1 Table A.

5.4.3 Appendix 1 Table A outlines Authorisation and Acceptance Procedures, including that procurements of £164,176 and over may be authorised by Procurement Forward Plan:

- The aim is to speed up the procurement process by removing unnecessary

bureaucracy – in this case, a duplication of the authorisation process.

- Any contract, including additions, extensions and variations, which have been included in a directorate or service's Budget and supporting plans and strategies or any other Committee approved plan is deemed as authorised irrespective of value.

## **5.5 Risk Management**

- 5.5.1 If the Council does not manage the contract renewal programme effectively and efficiently it could lead to a detrimental impact on value for money and the likelihood of delivering significant procurement savings. In addition the Council will be unable to forward plan the need for appropriate resource to support the programme. Well planned processes will enable effective commercial negotiations to take place thereby driving lower costs from the portfolio of contracts put to market.

## **5.6 Equalities and Diversity**

- 5.6.1 Pursuant to the Equality Act 2010, the council and all other organisations exercising public functions on its behalf must have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act; advance equality of opportunity between those with a protected characteristic and those without; promote good relations between those with a protected characteristic and those without. The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. It also covers marriage and civil partnership with regard to eliminating discrimination. All organisations that submit tenders for Council business are required to submit their Policy Statement regarding how they manage compliance with the Equality Act, or equivalent legislation.

## **5.7 Consultation and Engagement**

- 5.7.1 Consultation and engagement will take place within individual procurement projects as appropriate to the product(s) or service(s) required.

## **5.8 Insight**

- 5.8.1 Insight data will be used to support the delivery of the Annual Procurement Forward Plan as it will enable preparation of market engagement with internal and external stakeholders prior to procurement exercises and that Barnet's community requirements are taken into account to inform these.

## **6. BACKGROUND PAPERS**

- 6.1 Policy and Resources Committee 16 December 2015 Agenda Item 9  
Procurement Forward Plan 2016/2017 Appendix 1 Procurement activity by  
service area for 2016/2017  
<http://barnet.moderngov.co.uk/documents/s28058/Annual%20Procurement%20Forward%20Plan%202016-2017.pdf>

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**Annual Procurement Forward Plan [APFP] 2017-18**  
**Procurement Activity 2017-18**

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
<b>Estates</b>								
1	Civic Estates	TMC /Frameworks	£ 250,000.00	fixed term TBC	01/04/2017	Works Quote	01/07/2017	N
2	School Roofs	TMC /Frameworks	£ 650,000.00	fixed term TBC	01/04/2017	New Procurement	01/07/2017	N
3	School Mechanical Works	TMC /Frameworks	£ 650,000.00	fixed term TBC	01/04/2017	Works Quote	01/07/2017	N
4	School Electrical Works	TMC /Frameworks	£ 600,000.00	fixed term TBC	01/04/2017	Works Quote	01/07/2017	N
5	School Window replacement	TMC /Frameworks	£ 600,000.00	fixed term TBC	01/04/2017	Quote	01/07/2017	N
6	School Bulge Classes	TMC /Frameworks	£ 3,000,000.00	fixed term TBC	01/04/2017	OJEU	01/07/2017	N
7	Term Maintenance Contract	TMC /Frameworks	£ 20,000,000.00	up to 5 years	01/04/2017	OJEU	01/09/2017	N
8	Kitchen & dining room refurbishments	TMC /Frameworks	£ 1,400,000.00	fixed term TBC	01/04/2017	Works Quote	01/04/2017	N
9	School security & safety	TMC /Frameworks	£ 300,000.00	fixed term TBC	01/04/2017	Works Quote	01/04/2017	N
10	Asbestos	TMC /Frameworks	£ 1,000,000.00	fixed term TBC	01/04/2017	New Procurement	01/04/2017	N
11	Chandos Avenue Community Centre fit out	Tender/procuremnt tbc	£ 1,000,000.00	fixed term TBC	01/06/2017	Tender	01/09/2017	N
12	Mill Hill Golf Club Relocation	Tender/procuremnt tbc	£ 2,000,000.00	fixed term TBC	01/08/2017	Tender	01/10/2017	N
13	Localities Fit Out	Tender/procuremnt tbc	£ 500,000.00	fixed term TBC	01/05/2017	Tender	01/07/2016	N
14	Pavilion Fit out for Childs Hill Library	Tender/procuremnt tbc	£ 520,000.00	fixed term TBC	01/08/2017	Tender	01/10/2017	N
15	Alternative Provision - PRU	OJEU - Aggregated Procurement	£ 8,000,000.00	fixed term TBC	01/04/2017	New Procurement	01/07/2017	N
16	Surveys	Quote	£ 100,000.00	fixed term TBC	01/04/2016	OJEU	01/05/2016	N
17	Libraries Construction	Tender / Framework	£ 12,000,000.00	fixed term TBC	01/04/2017	New Procurement	01/04/2017	
18	Libraries - FF&E (office)	Tender / Framework	£ 100,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
19	Libraries - FF&E (shelving / library FF&E)	Tender / Framework	£ 500,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
20	Libraries - Legal	Tender / Framework	£ 250,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
21	Libraries - Communication	Tender / Framework	£ 25,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
22	Libraries - Removals	Tender / Framework	£ 250,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
23	Libraries - Surveys & Consultants	Tender / Framework	£ 250,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
24	Libraries - Technical Services	Tender / Framework	£ 250,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
25	Libraries - Statutory Services	Tender / Framework	£ 500,000.00	Fixed term TBC	01/12/2016	New Procurement	01/12/2016	
26	New Barnet Leisure Centre - FF&E	Tender / Framework	£ 2,000,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
27	Copthall Leisure Centre - FF&E	Tender / Framework	£ 2,000,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
28	Tarling Road - FF&E	Tender / Framework	£ 162,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
29	Tarling Road - Legal	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
30	Tarling Road - ICT	Tender / Framework	£ 150,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
31	Tarling Road - Decant	Tender / Framework	£ 200,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
32	Tarling Road - Temporary Accommodation	Tender / Framework	£ 200,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
33	Tarling Road - Surveys & Consultants	Tender / Framework	£ 40,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
34	Tarling Road - Highways Works	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
35	Tarling Road - Statutory Services	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
36	Daws Lane - FF&E	Tender / Framework	£ 162,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
37	Daws Lane - Legal	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
38	Daws Lane - ICT	Tender / Framework	£ 150,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
39	Daws Lane - Surveys & Consultants	Tender / Framework	£ 40,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
40	Daws Lane - Highways Works	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
41	Daws Lane - Statutory Services	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
42	Chandos Community Centre - Construction Contract	Tender / Framework	£ 1,500,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
43	Chandos Community Centre - FF&E	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
44	Chandos Community Centre - Legal	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
45	Chandos Community Centre - ICT	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
46	Chandos Community Centre - Decant	Tender / Framework	£ 20,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
47	Chandos Community Centre - Surveys & Consultants	Tender / Framework	£ 300,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
48	Chandos Community Centre - Technical Services	Tender / Framework	£ 300,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
49	Chandos Community Centre - Highways Works	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
50	Chandos Community Centre - Statutory Services	Tender / Framework	£ 50,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
51	Grahame Park Community Centre - Construction	Tender / Framework	£ 16,000,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
52	Grahame Park Community Centre - FF&E	Tender / Framework	£ 2,000,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
53	Colindale Office Accommodation - FF&E	Tender / Framework	£ 2,000,000.00	Fixed term TBC	01/04/2017	New Procurement	01/04/2017	
54	Clinical Waste Hygiene Services	Quote	£ 30,000.00	3	01/04/2017	Quote	01/04/2016	Y
55	Water Coolers	Quote	£ 30,000.00	3	01/04/2017	Quote	01/04/2016	Y
56	Corporate Cleaning Services	Tender	£ 1,500,000.00	3	01/06/2017	Extension/New	01/10/2017	Y
<b>Corporate/Commissioning</b>								
57	Highway structures metal fabrication	New Procurement	£ 20,000.00	2	01/03/2017	Competitive Quote	01/04/2017	
58	Supply of Bollards - plastic	Reprocurement	£ 24,000.00	2	01/03/2017	Competitive Quote	01/04/2017	N
59	Supply of Bollards - concrete	Reprocurement	£ 35,000.00	2	01/03/2017	Competitive Quote	01/04/2017	N
60	Supply of ready made signs - special order	New Procurement	£ 20,000.00	2	01/03/2017	Competitive Quote	01/04/2017	
61	Supply of sign plates and associated sundry equipment	Reprocurement	£ 75,000.00	2	01/03/2017	Competitive Quote	01/04/2017	N
62	Supply of sign vinyls and associated sundry equipment	Reprocurement	£ 75,000.00	2	01/03/2017	Competitive Quote	01/04/2017	N
63	Supply of sign posts and associated sundry equipment	Reprocurement	£ 100,000.00	2	01/03/2017	Competitive Quote	01/04/2017	N
64	Supply, Installation and Maintenance of Parking Bay Monitoring Equipment	New Procurement	£ 500,000.00	3	01/03/2017	Framework	01/04/2017	N

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
65	Supply of Highway Maintenance IT System	New Procurement	£ 75,000.00	1+3 years maint	01/03/2017	Competitive Quote	01/04/2017	N
66	Supply of Highway Engineering plant	New Procurement	£ 100,000.00	1	01/03/2017	Competitive Quote	01/04/2017	N
67	Parking Enforcement Contract	Reprocurement	£35-50Million	5+2	01/04/2017	OJEU	01/10/2018	N
68	Electronic Document Management System	Framework	£ 2,000,000.00	TBC	01/04/2017	New Procurement	01/04/2017	N
69	Procurement of Royal Mail Royalties for use of addressing products	Quote (Ordnance Survey)	£ 180,000.00	Up to 4 years	01/06/2017	New Procurement	01/06/2017	N
70	Procurement of an Information Request (Freedom of Information and Data Protection) casework system	Framework	£ 40,000.00	Up to 4 years	01/04/2017	New Procurement	01/04/2017	N
71	Consultancy support for the transformation programme	Framework	£ 150,000.00	fixed term TBC	01/04/2017	New Procurement	01/07/2017	N
72	External Project Gateway Reviews- assurance of strategic and critical projects	New Procurement	£ 30,000.00	3 months	01/04/2017	Mini Competition	01/06/2017	N
73	Delivery of Parks and Open Spaces Strategy - Consultancy and professional services	New Procurement	£ 500,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
74	Delivery of Parks and Open Spaces Strategy - Design and development	New Procurement	£ 20,000,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
75	Delivery of Parks and Open Spaces Strategy - Engagement	New Procurement	£ 100,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
76	Delivery of Recycling and Waste Strategy - Consultancy and professional services	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
77	Delivery of Recycling and Waste Strategy - Design and development	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
78	Delivery of Recycling and Waste Strategy - Engagement	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
79	Delivery of Street Cleansing Framework - Consultancy and professional services	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
80	Delivery of Street Cleansing Framework - Design and development	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
81	Delivery of Street Cleansing Framework - Engagement	New Procurement	£ 50,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
82	Environment and Street Scene Enforcement	New Procurement	£ 1,200,000	Multiple Single Requirement	01/04/2017	Mini Competition	01/08/2017	N
83	Silk Stream Valley Park	New Procurement	£ 5,000,000	Multiple Single Requirement	01/04/2017	OJEU - Open	01/04/2017	N
84	Environment Engagement	New Procurement	£ 50,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
85	Development of Tree Strategy and Consultation	New Procurement	£ 15,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
86	Delivery of Tree Strategy - Consultancy and professional services	New Procurement	£ 10,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
87	Delivery of Tree Strategy - Design and development	New Procurement	£ 10,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
88	Delivery of Tree Strategy -Engagement	New Procurement	£ 10,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
89	Development of Transport Strategy and Consultation	New Procurement	£ 100,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
90	Parking Transformation Programme - Consultancy and professional services	New Procurement	£ 150,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
91	Parking Transformation Programme - Engagement	New Procurement	£ 50,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
92	Multi Disciplinary Professional Services	New Procurement	£ 180,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
93	Implementation of Long-term Transport Strategy	New Procurement	£ 200,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
94	Street Lighting Consultancy Services	New Procurement	£ 50,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
95	Health and Safety Consultancy Services	New Procurement	£ 100,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
96	Parking Service design consultancy services	New Procurement	£ 70,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
97	Electric Vehicles and Electric Vehicle Charging Points implementation	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Quote	01/04/2017	N
98	Moving Traffic Contraventions	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2017	Mini Competition	01/04/2017	N
99	Parking Enforcement Contract	New Procurement	Up to £50 million	Multiple Single Requirement	01/04/2017	OJEU - CD	01/09/2018	N
100	Delivery of Parks and Open Spaces Strategy - Parks Construction and infrastructure	New Procurement	£ 5,000,000.00	TBC	01/04/2017	Mini Competition	01/04/2017	N
101	Victoria Recreation Ground - Consultancy & professional services	New Procurement	£ 50,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/04/2017	N
102	Victoria Recreation Ground - Development	New Procurement	£ 2,500,000.00	Multiple Single Requirement	01/06/2017	Mini competition	01/06/2017	N
103	Victoria Park - Consultancy and professional services	New Procurement	£ 25,000.00	Multiple Single requirement	01/06/2017	Mini Competition	01/06/2017	N
104	Victoria Park - Development	New Procurement	£ 600,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
105	Heybourne Park - Consultancy and professional services	New Procurement	£ 50,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
106	Heybourne Park - Development	New Procurement	£ 2,500,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
107	Colindale Parks - Consultancy and professional services	New Procurement	£ 100,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
108	Colindale Parks - Development	New Procurement	£ 500,000.00	Multiple Single Requirement	01/06/2017	Mini Competition	01/06/2017	N
109	Local Infrastructure Support	Tender	£ 225,000.00	2+1+1	31/05/2017	Full open tender	01/01/2018	
110	Media Database	Quote/Tender	£ 13,860.00	2+1	01/07/2017	Re-procurement	01/03/2018	Y
111	Filming location services	Reprocurement	£ 50,000.00	3	01/01/2016	Quote	01/04/2017	N
112	Social media platform	Quote/Tender	£ 13,500.00	2+1	30/07/2017	Re-procurement	05/12/2018	Y
113	Non-Life Insurance - Liability, Motor and Associated Legal Costs	Extension or Tender	£ 1,855,750.00	3 years + optional 2 yr LTA extension	01/01/2018	OJEU	01/10/2018	Y
114	Non-Life Insurance - Property and Miscellaneous Risks	Tender	£ 6,022,040.00	2 years plus 3 year LTA extension	01/01/2018	OJEU	01/10/2018	N
115	Performance, Risk and Programmes Reporting Software	Quote/Tender	Up to £164,176	upto 4 years	01/04/2017	New Procurement	01/07/2017	N
116	Professional and technical services to support development	New Procurement. Framework / tender	£ 100,000.00	up to 4 years	01/04/2017	New Procurement	01/07/2017	N

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
117	Financial consultancy support services to support development	New Procurement - Framework / tender	£ 50,000.00	up to 4 years	01/04/2017	New Procurement	01/07/2017	N
118	Employment support on regeneration estates	New Procurement	£ 100,000.00	up to 2 years	01/01/2017	New Procurement	01/04/2017	N
119	Professional and technical services to support skills commissioning in West London	To be led by WLA	Up to £40,000	1 year	01/01/2017	tbc	01/04/2017	N
120	Goods and services to support WLA Transformation Programme	New Procurement and extension	Up to £500k	up to 2 years	01/01/2017	tbc	01/04/2017	N
121	Town Centres Strategy for Edgware	Procurement of TC strategies X2	£ 25,000.00	1 year	01/01/2017	New Procurement	01/04/2017	N
122	Business Hubs	New procurement	Up to £500k	up to 3 years	01/01/2017	New Procurement	01/04/2017	N
123	Town Centre strategy delivery	New procurement	Up to £1m	1 year	01/01/2017	New Procurement	01/04/2017	N
124	Travel Management	New procurement	£ 320,000.00	3 years	01/04/2017	New Procurement	02/04/2017	N
125	Professional and technical services to support development	New Procurement. Framework / tender	£ 100,000.00	up to 4 years	01/04/2017	New Procurement	01/07/2017	N
126	Financial consultancy support services to support development	New Procurement Framework / tender	£ 50,000.00	up to 4 years	01/04/2017	New Procurement	01/07/2017	N
127	Employment support on regeneration estates	New Procurement	£ 100,000.00	up to 2 years	01/01/2017	New Procurement	01/04/2017	N
128	Professional and technical services to support skills commissioning in West London	To be led by WLA	Up to £40,000	1 year	01/01/2017	tbc	01/04/2017	N
129	Goods and services to support WLA Transformation Programme	New Procurement and extension	Up to £500k	up to 2 years	01/01/2017	tbc	01/04/2017	N
130	Town Centres Strategy for Edgware	Procurement of TC strategies X2	£ 25,000.00	1 year	01/01/2017	New Procurement	01/04/2017	N
131	Business Hubs	New procurement	Up to £500k	up to 3 years	01/01/2017	New Procurement	01/04/2017	N
132	Town Centre strategy delivery	New procurement	Up to £1m	1 year	01/01/2017	New Procurement	01/04/2017	N
133	Employee Benefits (multiple service call-off requirements and licence fees)	Tender	£ 470,011.00	1 + 1	01/01/2017	New Procurement	01/04/2017	Y
	<b>Re</b>							
134	Employability Support Services - Workfinder	Tender	£ 170,000.00	Up to two years	01/01/2017	New Procurement	01/04/2017	Y
135	Edgware Town Centre Strategy	Tender	£ 50,000.00	Six months	01/01/2017	New Procurement	01/04/2017	
136	Golder's Green Town Centre Strategy	Tender	£ 50,000.00	Six months	07/11/2016	New Procurement	01/01/2017	
137	Economic Strategy Review	Tender	£ 50,000.00	Six months	01/01/2017	New Procurement	01/04/2017	
138	Granville Road NW2 support services	Quotation	£ 90,000.00	3 years	01/04/2017	New Procurement	01/07/2017	
139	Dollis Valley support services	Quotation	£ 90,000.00	4 years	01/04/2017	New Procurement	01/07/2017	
140	Stonegrove support services	Quotation	£ 90,000.00	5 years	01/04/2017	New Procurement	01/07/2017	
141	West Hendon ITA	Quotation	£ 132,000.00	3 years	01/04/2017	New Procurement	01/08/2017	
142	Development Pipeline	Framework, Aggregated, OJEU DPS	TBC £100M+	fixed terms or upto 7 years	01/04/2017	New Procurement	01/07/2017	N
143	Design and masterplanning services to support development	Framework / OJEU compliant tender	up to £1.5m	Up to 4 years	01/04/2017	New Procurement	01/07/2017	N
144	s106 Pre-procurement Project Requirements		£ 500,000.00	fixed term per requirement	01/04/2017	New Procurement	01/04/2017	N

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
<b>Street Scene</b>								
145	Survey and potential treatment of asbestos of Street Scene assets	Quote/Tender	£ 90,000.00	fixed term TBC	01/04/2017	New Procurement	01/07/2017	
146	3G pitches	Tender	£ 1,500,000.00	fixed term TBC	01/04/2017	OJEU	01/10/2017	N
147	Transport Workshop Parts Supplies Contract	Tender	£ 1,200,000.00	fixed term TBC	01/04/2017	OJEU	01/10/2017	Y
148	Transport Workshop Vehicle Washing Contract	Quote/Tender	£ 150,000.00	fixed term TBC	01/04/2017	Quotation	01/08/2017	Y
149	Transport Workshop Maintenance Services Contract	Quote/Tender	£ 1,000,000.00	fixed term TBC	01/06/2017	OJEU	01/10/2017	Y
150	Transport Workshop Vehicle Hire Contract (inc Spot Hire)	Quote/Tender	£ 2,400,000.00	fixed term TBC	01/06/2017	OJEU	01/10/2017	Y
151	Transport Workshop Vehicle Leasing Contract	Quote/Tender	£ 800,000.00	fixed term TBC	01/06/2017	OJEU	01/10/2017	Y
152	Transport Workshop Goods/Services Supplies	Quote	£ 10,000.00	fixed term TBC	01/06/2017	OJEU	01/10/2017	Y
153	Supply and Fitting of Tyres	Tender	£ 100,000.00	fixed term TBC	01/04/2018	OJEU	01/10/2017	
154	Landscape and architect services for open spaces/play areas design	Quote	£ 100,000.00	fixed term TBC	01/04/2017	Quotation	01/06/2017	N
155	Road/footway/court surfaces - repairs and installation	Tender	£ 2,000,000.00	fixed term TBC	01/04/2017	OJEU	01/10/2017	Y
156	Transport workshop purchase of vehicle/plant/machinery	Tender	£ 2,000,000.00	fixed term TBC	01/06/2017	OJEU	01/10/2017	Y
157	Housing for Flat's recycling waste bins (Food waste bins for housing flat)	tender	£ 410,000.00	fixed term TBC	01/04/2017	New procurement	01/06/2017	N
158	Purchase of Vehicles, plant and machinery for Street Scene (price varied)	Tender	£ 5,000,000.00	fixed term TBC	01/06/2017	New Procurement	01/12/2017	Y
159	Consultants to aid specific grant applications, project delivery and community involvement	Quote	£ 300,000.00	fixed term TBC	01/05/2017	New Procurement	01/09/2017	N
160	Maintenance and supply of 2 stroke and pedestrian machinery	Quote	£ 70,000.00	fixed term TBC	01/04/2017	New Procurement	01/06/2017	N
161	Supply of materials and chemicals	Quote	£ 150,000.00	fixed term TBC	01/05/2017	New Procurement	01/07/2017	Y
162	Supply of hand tools, supplies and equipment	Quote	£ 150,000.00	fixed term TBC	01/05/2017	New Procurement	01/07/2017	Y
163	Supply of bins for parks & streets	Quote	£ 100,000.00	fixed term TBC	01/04/2017	New Procurement	01/06/2017	Y
164	Supply of plants, bulbs, grounds maintenance goods and materials	Quote	£ 170,000.00	fixed term TBC	01/05/2017	New Procurement	01/09/2017	Y
165	Maintenance and repair of sprinklers and irrigation systems	Quote	£ 30,000.00	fixed term TBC	01/06/2017	New Procurement	01/10/2017	N
166	Supply of play bark	Quote	£ 40,000.00	fixed term TBC	01/04/2017	New Procurement	01/05/2017	Y
167	Supply of gardening services inc installation and repairs	Quote	£ 160,000.00	fixed term TBC	01/06/2017	New Procurement	01/10/2017	N

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168	Supply of Park/Street furniture	Quote	£ 100,000.00	fixed term TBC	01/04/2017	New Procurement	01/06/2017	Y
169	Inspection and maintenance (asset mgt) database for Greenspaces & Streets	Quote	£ 80,000.00	fixed term TBC	01/04/2017	New Procurement	01/10/2017	N
170	Enforcement Delivery - public realm	Tender	£ 800,000.00	fixed term TBC	01/05/2017	New Procurement	01/10/2017	N
171	Borough wide Weed spraying	tender	£ 600,000.00	fixed term TBC	01/04/2017	New Procurement	01/09/2017	Y
172	Fleet software renewal and improvements to upgrade for new business review wording	Quote	£ 50,000.00	fixed term TBC	01/04/2017	New Procurement	01/07/2017	N
173	Parking meters for park car parks installation/maintenance	Quote	£ 25,000.00	fixed term TBC	01/04/2017	New Procurement	01/06/2017	N
174	Provision of Petrol/Diesel via fuel card payment system	Tender/Framework	£ 90,000.00	fixed term TBC	01/04/2017	New Procurement	01/08/2017	Y
175	Metal Fabrication and Bespoke Works	Tender	£ 280,000.00	fixed term TBC	01/01/2017	New Procurement	01/08/2017	Y
176	Supply Play spares	Quote	£ 50,000.00	fixed term TBC	01/01/2017	New Procurement	01/08/2017	
177	Supply of bins, containers and sacks	Tender	£ 1,000,000.00	fixed term TBC	01/01/2017	New Procurement	01/08/2017	
<b>Family Services</b>								
178	Various IRO Framework/DPS	Tender	£ 260,000	2+1+1	01/09/2017	Full open tender	01/04/2018	N
179	Provision of supported accommodation to young	Extension/Tender	£ 645,000	3+1	01/09/2017	Full open tender	01/04/2018	N
180	Special Transport Escort	Tender	£ 100,000	3+1	01/09/2017	Competitive Quote	01/05/2018	N
181	Applications Software for Early Intervention Software	Extension	£ 182,700	5+1+1	01/01/2018	Extension	01/09/2018	Y
182	E-Finance System	Extension	£ 243,700	5+1+1	01/01/2018	Extension	01/09/2018	Y
183	The Appropriate Adults Service (TAAS)	Tender	£ 60,000	3+1	01/08/2017	Competitive Quote	01/01/2019	Y
184	Meadow Close	Tender/Framework	£ 1,500,000.00	fixed term TBC	01/04/2017	New Procurement	01/09/2017	N
<b>Adults</b>								
185	Day Opportunities Work Streams	OJEU	£ 1,815,000.00	3 + 1	01/10/2016	OJEU	01/04/2017	N
186	IMCA/IMAH/DOLS	Tender	£ 460,000.00	3 + 2	01/04/2017	OJEU Open	01/04/2017	Y
187	Deep Cleaning Service	ITQ	£ 125,000.00	3 + 1	01/04/2017	ITQ	03/11/2017	N
188	Health Watch	OJEU	£ 906,805.00	3 + 1	01/11/2017	OJEU	01/04/2018	Y
189	Extra Care Wood Court, Selig Court, ECH Sheltered Plus Schemes	Extension / Tender	£ 13,100,000.00	3 + 2	01/01/2017	OJEU	01/04/2017	N
190	Extra Care Moreton Close -Teckal Exemption	Teckal Exemption		5+ 2	01/01/2017	Teckal Exemption	01/11/2017	N
191	Sheltered Alarm Services	Tender	£ 700,000.00	3 + 1	01/01/2017	OJEU	01/04/2017	N
192	Supported Living Floating Support	OJEU	£ 52,000,000.00	3+ 1	01/09/2016	Re opening list	01/04/2017	Y - 3+1+1

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193	Stroke Services Phase 2	ITQ	£ 104,970.00	1	01/10/2016	ITQ	01/04/2017	N
194	External Support Planning Brokerage	OJEU	£ 730,000.00	3 + 2	01/01/2017	OJEU	01/10/2017	N
195	Neighbourhood Services	OJEU	£ 4,500,000.00	3 + 2	01/02/2017	OJEU	01/10/2017	N
196	Prevention Support for People with Visual Impairment	ITQ	£ 140,000.00	3 + 1	01/04/2017	ITQ	01/04/2018	N
197	Social Care Reviewing Capacity	OJEU	£ 1,500,000.00	2 + 1	01/02/2017	OJEU	01/10/2017	N
198	Specialist Residential Service (Campus)	Extension	£ 2,700,000.00	2	01/02/2017	Extension	01/04/2017	Y
199	Early Support Strategic Interventions	OJEU	£ 14,000,000.00	3+2	01/04/2017	OJEU Open	01/04/2018	Y
200	Residential and Nursing Care WLA	OJEU	£ 365,600,000.00	4+2+2	01/04/2017	OJEU Open	01/10/2017	N/A
201	Enablement Service	Extension/OJEU	£ 2,000,000.00	1+1	01/04/2017	Extension	01/04/2017	
<b>Children's and Families</b>								
202	Home and Community Support	Extension/ Variation	£ 600,000.00	2+1+1	01/12/2017	OJEU	01/07/2018	Y
203	Appropriate Adults	Extension/ ITQ	£ 60,000.00	3+1	01/08/2017	ITQ	01/01/2018	Y
204	Independent Social Workers	Re-open list Extension/ Tender	£ 420,000.00	2+1+1	01/01/2017	OJEU	01/04/2018	Y
205	Early intervention (health coaching)	Extension/ Tender	£ 300,000.00	2+1+1	01/09/2017	OJEU	01/04/2018	Y
206	Resilient Futures provisions	Re-open list/ Extension/ OJEU	£ 1,600,000.00	1+1+1	01/02/2017	OJEU	01/09/2017	Y
207	Specialist 1:1 Mentoring Support	Extension/ OJEU	£ 420,000.00	1+1+1	01/10/2017	OJEU	01/04/2018	Y
208	Supported Accommodation for Young People in Barnet- Housing management and wraparound support for Youth Homelessness	Extension/ Tender	£ 1,000,000.00	3+1+1	01/07/2017	OJEU	01/04/2018	Y
209	Short Breaks For Disabled Children Extension/tender (Lots)	Extension/ Tender	£ 1,200,000.00	2+1+1	01/01/2017	OJEU	01/04/2017	Y
210	Independent Visitor Scheme	ITQ	£ 130,140.00	2+1	31/03/2017	ITQ	05/10/2017	Y
211	Placements - LAC Residential, IFA and semi-independent Placements via London Care Placements, West London Alliance DPS and Barnet directly contracted providers or via a Barnet Approved List or block placements	Extension/ OJEU	£ 60,000,000.00	3+1+1+1	01/01/2017	OJEU	01/04/2017	Y
212	Libraries stock, supplies and specialist requirements including Frameworks	Extension/ Tender	£ 6,000,000.00	3+1+1	01/01/2017	OJEU	01/04/2017	Y
213	NRPF Access licence	Access Agreement	£ 10,000.00	1+1+1+1+1	01/09/2017	OJEU	01/12/2017	Y
214	Return Home Interview Service	OJEU	£ 700,000.00	2+1+1	01/01/2017	OJEU	01/02/2017	Y
215	Duke of Edinburgh	ITQ	£ 180,000.00	1+1+1+1	01/01/2017	OJEU	02/04/2017	Y
216	Specialist assessments including forensic assessments & parenting assessments	ITQ	£ 175,000.00	1+1+1+1	01/01/2017	OJEU	01/04/2017	Y

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
217	E-finance (IT system) E-finance (IT system)	Extension/ ITQ	£ 64,800.00	1+1+1+1	01/01/2017	OJEU	01/04/2017	Y
218	Social Care IT Systems	Extension/ ITQ	£ 183,000.00	2+1+1	01/01/2017	OJEU	01/04/2017	Y
219	Children's Centre Management	Extension/ ITQ	£ 84,000.00	2+1+1	01/01/2017	OJEU	01/04/2017	Y
220	Licence Agreements: YOT	Extension/ Tender	£ 50,000.00	2+1+1	01/01/2017	OJEU	01/04/2017	Y
221	IT improvement works	OJEU	£ 400,000.00	1+1+1+1	01/01/2017	OJEU	01/04/2017	Y
222	Libraries IT Transformation and Management System	Tender	£ 1,600,000.00	5		OJEU	01/10/2016	N
223	Secure transport	ITQ	£ 100,000.00	2+1+1	01/07/2017	OJEU	04/05/2018	Y
224	Workforce development	OJEU/ Extension	£ 1,500,000.00	1+1	01/01/2017	OJEU	01/04/2017	Y
225	Pre paid cards (TBC)	ITQ	£ 40,000.00	3+1	01/01/2017	OJEU	01/04/2017	Y
226	Specialist Advice Services	OJEU	£ 600,000.00	1+1	01/01/2017	OJEU	01/04/2017	Y
227	Independent Reviewing Officers	Tender	£ 400,000.00	1+1+1+1	01/07/2018	Tender	01/04/2019	Y
228	CAF and Safeguarding to the voluntary and community sector	Extension / ITQ	£ 105,000.00	2+1	01/01/2017	OJEU	05/01/2017	Y
229	Social Work Recruitment	Tender	£ 400,000.00	1+1	01/01/2017	OJEU	01/01/2017	Y
230	Family Services Procedures Manual	Tender	£ 45,000.00	3	01/04/2018	OJEU	08/12/2018	N
231	Transformation	Tender	£ 1,000,000.00	1+1	01/01/2017	OJEU	01/04/2017	Y
232	Raising standards in childcare provisions	Extension/ Tender	£ 231,100.00	2+1+1	01/07/2017	OJEU	01/04/2018	Y
233	Women's support group and play therapy	Extension/ Tender	£ 106,885.00	2+1+1	01/07/2017	ITQ	01/04/2018	Y
234	Interpretation and Translation service	Tender	£ 700,000.00	2+1+1	01/04/2017	OJEU	01/09/2017	Y
235	Advocacy	Tender	£ 320,000.00	2+1+1	01/01/2017	OJEU	01/07/2017	Y
236	Hearing the Voices for Young People	Tender/ Extension	£ 140,000.00	1+1+1	01/01/2017	ITQ	01/04/2017	Y
237	Family Placements	ITQ	£ 150,000.00	1+1+1	01/01/2017	OJEU	01/04/2017	Y
	<b>Public Health</b>							
238	NHSE Health Visiting Contract (NHSE)	Extension	£ 4,322,004.00	3+1+1	01/01/2017	OJEU	01/04/2017	N
239	School Nursing (including NCMP)	Tender	£ 1,030,009.00	3+1+1	01/01/2017	OJEU	01/04/2017	N
240	Family Nurse Planning	Tender	£ 350,000.00	3+1+2	01/01/2017	OJEU	01/04/2017	N
241	Breast Feeding	Tender	£ 115,000.00	3+1+3	01/01/2017	OJEU	01/04/2017	
242	Childrens Oral Helath Promotion	Tender	£ 59,000.00	3+1+4	01/01/2017	ITQ	01/04/2017	
243	CAMHS	Extension/Tender	£ 36,000,000.00	3+1+5	01/02/2017	OJEU	01/10/2017	N
244	Therapies (SALT Speech and Language)	Tender	£ 2,053,635.00	3+1+6	01/01/2017	Tender	01/04/2017	
245	LAC looked After Children Section 75 (pooled)	Tender	£ 131,941.00	3+1+7	01/01/2017	Tender	01/04/2017	
246	Occupational Therapist	Extension/Tender	£ 401,000.00	3+1+8	01/01/2017	Tender	01/04/2017	

**Annual Procurement Forward Plan [APFP] 2018-19**  
**Procurement Activity 2018-19**

No.	Contract Name / description	procurement activity required	Total Contract Value including extensions i.e. annual cost of contract x period of contract + extension period	Contract Term including extensions number of years of contract plus extension and/or fixed period for defined single requirement	Procurement Start Date	Procurement Type	Start date of new contract or extension	Extension available in contract and not already exercised Y/N
<b>Corporate/Commissioning</b>								
1	Delivery of Parks and Open Spaces Strategy - Consultancy and professional services	New Procurement	£ 500,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
2	Delivery of Parks and Open Spaces Strategy - Design and development	New Procurement	£ 20,000,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
3	Delivery of Parks and Open Spaces Strategy - Engagement	New Procurement	£ 100,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
4	Delivery of Recycling and Waste Strategy - Consultancy and professional services	New Procurement	£ 100,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
5	Delivery of Recycling and Waste Strategy - Design and development	New Procurement	£ 100,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
6	Delivery of Recycling and Waste Strategy - Engagement	New Procurement	£ 50,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
7	Delivery of Street Cleansing Framework - Consultancy and professional services	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
8	Delivery of Street Cleansing Framework - Design and development	New Procurement	£ 200,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No
9	Delivery of Street Cleansing Framework - Engagement	New Procurement	£ 50,000.00	Multiple Single Requirement	01/04/2018	Mini Competition	TBC	No



**Policy and Resources Committee**  
**1 December 2016**

<b>Title</b>	<b>Short term extension of The Barnet Group management oversight for Streetscene</b>
<b>Report of</b>	Commissioning Director - Environment
<b>Wards</b>	All
<b>Urgent</b>	No
<b>Key</b>	Yes
<b>Status</b>	Public
<b>Enclosures</b>	None
<b>Officer Contact Details</b>	Jamie Blake <a href="mailto:Jamie.Blake@barnet.gov.uk">Jamie.Blake@barnet.gov.uk</a> (020 8359 7609) Kitran Eastman <a href="mailto:Kitran.Eastman@barnet.gov.uk">Kitran.Eastman@barnet.gov.uk</a> (020 8359 2803)

**Summary**

This report seeks to obtain approval for an extension to The Barnet Group agreement to carry out management oversight of Streetscene services. In February 2016 The Barnet Group was engaged to provide senior management oversight to the Streetscene Delivery Unit (DU) for an interim six month period. This was extended to nine months by Policy and Resources Committee in March 2016.

The Streetscene Alternative Delivery Model project is currently progressing well and on 1 November 2016 Council agreed the short list of options. This included two options involving the Barnet Group. The preferred option for delivery will be reported to the Environment Committee on 15 March 2017.

Setting the extension of the current agreement to a date following the Environment Committee's decision will allow the service to have stability until a decision is made on the new model.

## Recommendations

- 1. That Policy and Resources Committee consider and approve the extension of The Barnet Group Management oversight for Streetscene until 30 April 2017.**

### 1. WHY THIS REPORT IS NEEDED

- 1.1 The Streetscene Delivery Unit (DU) is an in-house service which currently has Barnet Group management oversight. This oversight agreement runs until 1<sup>st</sup> December 2016.
- 1.2 The Streetscene Delivery Unit (DU) is responsible for delivering a wide range of front line universal services across the Borough. These services have generally been successful in keeping the Borough clean and making incremental improvements within the recycling service.
- 1.3 The Street Scene Alternative Delivery Model (ADM) project is currently reviewing how services should be provided in the future. The initial Outline Business Case (OBC) was agreed by Full Council on 1 November 2016 following Environment Committee consideration. This initial OBC short listed four preferred options:
  - In-house service delivery with management support from The Barnet Group
  - Transfer service delivery to The Barnet Group as a Local Authority Trading Company (LATCo)
  - Outsource service delivery to an external provider(s)
  - Share service delivery with a neighbouring local authority
- 1.4 Public consultation is currently ongoing on the above four options as well as the wider ADM project. The consultation can be found on Engage Barnet (<https://engage.barnet.gov.uk/>) or paper copies are available on request. The consultation runs until 15 January 2017 and is titled “What’s the future for recycling, waste, parks and cleansing across Barnet?”
- 1.5 The preferred option from this short list will be considered and agreed by Environment Committee on 15 March 2017.
- 1.6 Two of these options include The Barnet Group, therefore the extension of the current agreement to a date following the Environment Committee’s decision will allow the service to have stability until the new model is chosen.
- 1.7 The transitioning implication of moving the current arrangements to the new preferred arrangements may also form part of the discussion in March 2016 for Environment Committee.
- 1.8 Extension to 30 April 2017 will also allow discussion with The Barnet Group about their shorter term involvement with Streetscene, should one of their options not be chosen.

## **Background to The Barnet Group involvement with Streetscene**

- 1.9 In 2015/16 the council carried out a strategic review of the Streetscene Delivery Unit (DU) to ensure that it is fit for purpose to address the demands of a developing Borough, and the changing nature of public service delivery. While issues had been raised previously through the various audit processes the DU had not taken the opportunity to invest in additional senior management capacity. As a result of this lack of response, significant change had not occurred and outcomes had not been delivered against Key Performance Indicators (KPIs).
- 1.10 The changing nature of public service delivery resulted in greater pressure being placed on the DU to “do more with less”, and the service has also had to adapt to the changing delivery model that has been adopted by Barnet Council in terms of the relationship between the Commissioning and Delivery Units.
- 1.11 To reduce the risk of service failure during the assessment of the Streetscene ADM project and to improve the support of the DU during this very important period, it was deemed to be preferable that the service be placed within a successful, stable senior management environment that would be used to assist with the transformation projects whilst maintaining the staff on LBB terms and conditions.
- 1.12 The Barnet Group has been engaged for nine months to act as an overarching senior management facility; essentially setting up an Environmental Services Unit which has suitable specialist support brought in to help develop and deliver the short to medium-term financial and operational KPIs and the development and delivery of the Streetscene ADM project.
- 1.13 The nine month approval for that agreement that was given by Policy and Resources Committee in March 2016 is now ending.

## **2. REASONS FOR RECOMMENDATION**

- 2.1 It is recommended that Policy and Resources Committee consider and approve the extension of the Barnet Group Management oversight for Streetscene until 30 April 2017. This will enable the service to have stability until the new Alternative Delivery Model is chosen. It will also enable the timing, transfer and implications of transitioning the current arrangements to the preferred new arrangements to be considered by the Environment Committee.

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 **End Agreement with The Barnet Group** – Potentially a new senior management team could be parachuted into the service, probably consisting of a Service Director and at least two additional Assistant Director Posts. This would enhance the senior management capacity within the DU and mirror more closely the successful DU structures that exist elsewhere within the business. It should be noted, however, that there is no guarantee that suitable senior officers are currently available. Given the short period of time until the preferred options from the ADM process is considered by Environment Committee it was considered that this would cause instability for the service and the staff.

#### **4. POST DECISION IMPLEMENTATION**

- 4.1 There would be monitoring of the interim arrangement with The Barnet Group, while the ADM long term solution is considered.

#### **5. IMPLICATIONS OF DECISION**

##### **5.1 Corporate Priorities and Performance**

5.1.1 The Corporate Plan 2015-2020 is based on the core principles of fairness, responsibility and opportunity to make sure Barnet is a place:

- Of opportunity, where people can further their quality of life
- Where people are helped to help themselves, recognising that prevention is better than cure
- Where responsibility is shared, fairly
- Where services are delivered efficiently to get value for money for the taxpayer

5.1.2 The Corporate Plan 2015-2020 includes the following aims:

- We will be a Leader in London for recycling
- Over 50% of waste collected will be reused, recycled or composted in 2020

5.1.3 There are no implications relating to the Health and Wellbeing Strategy and its stated priorities, or the future health and wellbeing needs of the local population as identified in Barnet's Joint Strategic Needs Assessment.

##### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

5.2.1 The aim of the extension to the management arrangement of the DU is to ensure that DU is capable of continuing to implement the changes needed to meet the saving targets agreed by Environment Committee. Namely £5 million of savings allocated directly to street scene services, and the further £2.6 million of savings allocated for waste disposal which are wholly reliant on transformational changes within the service area.

5.2.2 The budget for this extension to the interim arrangement is £125,000 for the period December 2016 to April 2017. This will be provided from the £4.02m transformation budget agreed at Policy and Resources Committee on the 16<sup>th</sup> of February 2016 for the Environment Portfolio. This budget is funded from the council's transformation reserve.

5.2.3 The Barnet Group are a wholly owned local authority company which is controlled by the council as an Arm's Length Management Organisation (ALMO). As an ALMO owned and controlled by the council there would no need for a public procurement exercise because as it would come within the "Teckal" exemption. Section 12 of the Public Contracts Regulation 2015 provides that a procurement exercise under these regulations would not have to be carried out in such a case.

5.2.4 The current Streetscene staff would continue to remain in LBB employment.

5.2.5 There are currently no IT, Property or suitability implications.

### **5.3 Social Value**

5.4 Section 1 of the Public Services (Social Value) Act 2012 requires people who commission public services to think about how they can also secure improvement in wider social, economic and environmental wellbeing. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders. In taking forward the ADM options due regard will be paid to the Social Value Act

### **5.5 Legal and Constitutional References**

5.5.1 Responsibility for Functions-Annex A of the Constitution sets out the terms of reference of the Policy and Resources Committee including:

- To be the principal means by which advice on strategic policy and plans is given and co-ordinated
- To be responsible for the overall strategic direction of the Council
- To be responsible for the overall strategic direction of the Council including strategic partnerships.

5.5.2 The Council's Contract Procedure Rules provide at paragraph 3.2 that the Contract Procedure Rules do not apply to non-procurement activities.

### **5.6 Risk Management**

5.6.1 Initial risk rating indicates this short term extension as low risk as a result appropriate monitoring procedure will be put in place as part of the project steering group's monitoring programme.

5.6.2 The management of risk is done on a continual basis and reported as part of the Council Quarterly Performance regime and considered as part of the Performance and Contract Management Committee quarterly monitoring report.

5.6.3 Risks for this project will be managed through a strategic partnership board and review and revised at its meetings.

### **5.7 Equalities and Diversity**

5.7.1 The Corporate Plan 2015-2020 sets the Strategic Equalities Objective, which is: that citizens will be treated equally, with understanding and respect, and will have equal access to quality services which provide value to the tax payer. Changes to policies and services are analysed in order to assess the potential equalities impacts and risks and identify any mitigating action possible before final decisions are made.

- 5.7.2 The extension of The Barnet Group management agreement has been reviewed against the protected characteristics groups under the 2010 Equality Act namely age, disability, ethnicity, gender, gender reassignment, marriage and civil partnerships religion and belief, sexual orientation and transgender. There is not believed to be a negative equalities impact based on these changes

## 5.8 Consultation and Engagement

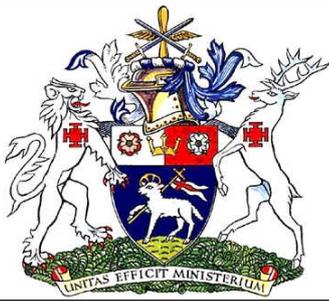
- 5.8.1 None for this item. Consultation is ongoing, however, for the Streetscene ADM process.

## 5.9 Insight

- 5.9.1 None for this item

## 6. BACKGROUND PAPERS

- 6.1 Council, 1 November 2016, Item 12.1, Referral from Environment Committee: Street Scene ADM,  
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=695&MId=8590&Ver=4>
- 6.2 Environment Committee, 29 September 2016, Item 8, Street Scene Alternative Delivery Model,  
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=695&MId=8590&Ver=4>
- 6.3 Policy and Resources Committee, 22 March 2016, Street Scene Delivery Unit Management Changes,  
<http://barnet.moderngov.co.uk/documents/s30720/Street%20Scene%20Delivery%20Unit%20Management%20Changes.pdf>
- 6.4 [Delegated Powers Report, 5 February 2016, Approval for the appointment of The Barnet Group to provide a 6 month interim management facility to the Street Scene Delivery Unit:](#)  
<http://barnet.moderngov.co.uk/documents/s29808/Summary%20DPR%20-%20Approval%20for%20the%20Appointment%20of%20The%20Barnet%20Group%20to%20Provide%20a%20Six%20Month%20Interim%20Manage.pdf>



**Policy and Resources Committee**  
**1 December 2016**

<b>Title</b>	<b>Pentavia Retail Park - Planning Brief</b>
<b>Report of</b>	Cath Shaw - Commissioning Director Growth and Development
<b>Wards</b>	Mill Hill
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	Yes
<b>Enclosures</b>	Appendix 1: Pentavia Retail Park - Planning Brief Appendix 2: Consultation Report
<b>Officer Contact Details</b>	Harriet Beattie – Principal Planning Officer 0208 359 7131 <a href="mailto:harriet.beattie@barnet.gov.uk">harriet.beattie@barnet.gov.uk</a>

**Summary**

The Planning Brief sets out the Council’s vision for the sustainable mixed use development of the former Pentavia Retail Park site. The Planning Brief focuses on the following key objectives :

- a sustainable mixed use development, including residential, with a range of new affordable homes that contribute to housing choice;
- new employment space to serve the needs of modern businesses, in particular small to medium sized enterprises;
- new outdoor amenity space and landscaping;
- new and ancillary small-scale ‘non-destination’ retail and leisure uses;
- new and ancillary community space such as a nursery;
- exemplary standards of sustainable design and environmental quality that respond to the challenging environmental context of the location; and
- improvements to existing transport infrastructure and creation of new pedestrian and cycle links.

The Planning Brief has been subject to a 6 week period of public consultation. Upon adoption the Planning Brief will guide development proposals for this site.

## Recommendations

1. That the Committee note the responses and agree the Council responses in the Consultation Report attached at Appendix 2.
2. That the Committee adopt the Pentavia Planning Brief attached at Appendix 1.

### 1. WHY THIS REPORT IS NEEDED

- 1.1 Surrounded by the A1, M1 and Midland Mainline, the former Pentavia Retail Park presents an opportunity to create a sustainable mixed use development on a challenging site.
- 1.2 In order to shape the future of this site a draft Planning Brief has been produced. This sets out the key parameters to consider in determining the future of the site reflecting its out of town centre location and site history. It also highlights the opportunities it provides for the delivery of new homes and employment space that supports small to medium enterprises together with ancillary retail and leisure uses.

### 2. REASONS FOR RECOMMENDATIONS

- 2.1 Producing a Planning Brief is vital to ensure that any future development of the former Pentavia Retail Park site comes forward in line with Council priorities and delivers sustainable development.

### 3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 The alternative option is to not produce a Planning Brief. Failure to produce a Planning Brief could result in a less strategic response to any future development of the site. This may also result in Council priorities not being achieved.

### 4. POST DECISION IMPLEMENTATION

- 4.1 The Planning Brief has been subject to a period of public consultation and revised in light of the comments received. The adopted Planning Brief will be a material consideration in the determining future planning applications on this site.

### 5. IMPLICATIONS OF DECISION

#### 5.1 Corporate Priorities and Performance

- 5.1.1 The Pentavia Retail Park Planning Brief helps to meet Corporate Plan 2015-20 strategic objectives in ensuring that Barnet is a place:-

- of opportunity, where people can further their quality of life – *the draft Brief provides guidelines for ensuring that development will enhance the appearance of this site. It supports the provision of a good mix of uses including residential, employment and ancillary retail and leisure as well*

*as a range of housing types that provide housing choice.*

- where people are helped to help themselves, recognising that prevention is better than cure – *the Planning Brief supports provision of employment floorspace that meets the needs of modern businesses.*

## **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

5.2.1 The cost of producing the draft Planning Brief is being met by the prospective developers. The Planning Brief has been produced by Regional Enterprise (Re) on behalf of the Council.

## **5.3 Social Value**

5.3.1 The Planning Brief sets out the parameters for the delivery of a mixed use development. Through the delivery of a new suburban mixed and balanced community in Mill Hill, future development will secure social, economic and environmental benefits.

5.3.2 Social benefits will be secured through the delivery of a mix of housing unit sizes and tenures including affordable housing.

5.3.3 Economic benefits will be delivered through the provision of modern business space that addresses the needs of small and medium enterprises.

5.3.4 Environmental benefits will be delivered through provision of soft landscaping on the site and design solutions that together utilise a range of mitigation measures to address the existing high levels of noise and air pollution.

## **5.4 Legal and Constitutional References**

5.4.1 Constitution Responsibilities for Functions Annex A sets out the terms of reference of the Policy and Resources Committee including authority to “Approve and adopt Local Development Scheme, Statement of Community Involvement, Supplementary Planning Documents and Planning Briefs

5.4.2 Site specific Planning Briefs provide an opportunity to bridge the gap between the provisions of the Local Plan and the requirements of any future planning application for the site.

5.4.3 Planning Briefs should be consistent with and provide guidance, supplementing the policies and proposals of the Local Plan. Planning Briefs cannot contradict, rewrite or introduce new policies.

5.4.4 Whilst Planning Briefs can have a number of functions, such as promoting development of a site; addressing particular site constraints and/or further interpretation of local plan policies it must be noted that a Planning Brief is not a full Development Plan Document and although a material consideration in any planning application it carries limited weight.

Section 6.5 of Responsibility for Functions, Council Constitution defines a key decision as one which:

- will result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates; or
- is significant in terms of its effects on communities living or working in an area comprising two or more wards.

## **5.5 Risk Management**

5.5.1 A consequence of failing to produce a Planning Brief for the Pentavia Retail Park site may lead to a less strategic response to the development and result in Council priorities not being achieved.

## **5.6 Equalities and Diversity**

5.6.1 The Brief helps implement policy set out in the Local Plan Core Strategy. Adopted in 2012 the Core Strategy was subject to an Equalities Impact Assessment (EqIA).

5.6.2 Only at the time of the planning application, will sufficient detail with which to analyse the equalities impact be available. In line with corporate policy the Council is committed to comply with the 2010 Equalities Act and Barnet's Equalities Policy, therefore equalities implications will be assessed at the planning application stage.

5.6.3 We have, however, considered the borough equalities data outlined in the Barnet Community Cohesion and Equalities Data Summary, and this has informed our recognition of the needs of the Mill Hill area, and adjoining Colindale.

5.6.4 This mixed use development should provide choice through a range of units by size, type and tenure. It should also provide choice for businesses in terms of access to a range of employment spaces; these objectives are set out in the attached planning brief.

5.6.5 The brief further sets out risks and challenges associated with redevelopment of the site (particularly environmental and access challenges) in order to identify barriers that need to be overcome. This is in order to ensure vulnerable people living within a mixed use redevelopment of the site will not become socially excluded. By setting out these key site challenges, the brief reduces the risk of a planning application being considered without sufficient attention to the site specific equalities risks.

## **5.7 Consultation and Engagement**

5.7.1 The Council carried out a public consultation exercise on the draft Planning Brief for a period of six weeks.

5.7.2 The Brief was published online and advertised in the local paper. A public

event in Mill Hill was held on 5<sup>th</sup> October to provide the opportunity for people to discuss the proposals with officers and provide feedback. A separate meeting was also arranged with the Mill Hill Neighbourhood Forum on 19<sup>th</sup> September. The consultation responses from the public event and written responses is summarised in Appendix 2. This appendix also outlines the amendments made to the brief as a result of the consultation.

Below is a summary of the issues raised:

### **Impact on traffic**

- Impact on Bunns Lane and surrounding local road network
- Overspill parking
- Should not restrict development of adjoining sites
- Transport Assessment should accord with TfL

### **Pollution and noise**

- Existing noise and air pollution makes site unsuitable for residential development
- Green buffers would have a negligible impact on pollution mitigation
- Impact of light pollution on University of London Observatory
- Increase in pollution resulting from greater traffic and congestion from the redevelopment of the site

### **Affordable Housing**

- Evidence should be provided to show housing need
- Wording regarding affordable housing not strict enough

### **Impact on Local Services**

- Detrimental impact on local services including surgeries and nurseries which are already under strain
- Detrimental impact on local transport services which are also under strain

### **Mass of building and impact on character**

- Should comply with London Plan standards
- Limit should be set on height of proposed buildings
- Future development should be in keeping with Mill Hill
- Visibility of new development and impact on views

### **Other appropriate uses**

- Leisure uses are desirable
- Retail park serves important retail function for Mill Hill

## 6. BACKGROUND PAPERS

6.1 [Barnet Local Plan Core Strategy](#), September 2012

6.2 [Barnet's Statement of Community Involvement](#), July 2015

6.3 Policy and Resources Committee, 1 September 2016, item 9, Pentavia Retail Park – Draft Planning Brief  
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8729&Ver=4>



## **Pentavia Retail Park, Mill Hill**

### **Draft Planning Brief**

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## Introduction

### Purpose of the Planning Brief

- 1.1 Surrounded by the A1 / A41, M1 and Midland Mainline, the former Pentavia Retail Park presents an opportunity to create a sustainable mixed use development on a physically constrained site of low environmental quality in an outmoded out of town centre location, reuniting the site with the surrounding residential area of Mill Hill.

### Objectives for the Pentavia site

- 1.2 The objectives for the site are:

- a sustainable mixed use development, creating a new place where people will chose to live with a range of new affordable homes that contribute to housing choice;
- new employment space to serve the needs of modern businesses, in particular small to medium enterprises;
- new outdoor amenity space and landscaping of a quality that enhances this location on the edge of Mill Hill;
- new and ancillary small-scale 'non-destination' retail and leisure uses that serves the needs of the new development;
- new and ancillary community space, such as a nursery, that serves the needs of Colindale and Mill Hill;
- exemplary standards of sustainable design and environmental quality in order to mitigate and adapt to the effects of a changing climate as well as respond to the challenging environmental context of the location; and
- improvements to existing transport infrastructure and creation of new and improvements to pedestrian and cycle links to Mill Hill Town Centre, Colindale, Mill Hill Park, Cophall and local transport nodes.

- 1.3 In order to deliver these objectives, the sustainable redevelopment of the Pentavia site presents a number of opportunities. These include:

- bringing this brownfield site back into a beneficial and more sustainable use through the removal of the existing out of centre retail park primarily accessible by car;

- new residential uses that contribute towards housing delivery and choice in Barnet;
- new commercial uses to serve the needs of SME businesses and community uses primarily to serve the needs of Colindale and Mill Hill;
- new green infrastructure that contributes to the amenity of residents as well as local biodiversity;
- a development of an innovative and exemplary design that helps to re-integrate the site with surrounding residential areas and screen it from the M1 and A1 / A41; and
- new pedestrian and cycle links that contribute to the re-integration of the site with Colindale and Mill Hill.

## 2 The Existing Site

- 2.1 The site is the former Pentavia Retail Park, as shown in Figures 1 and 2, which is in the Mill Hill ward to the north of the London Borough of Barnet. The 3.45 hectare site, see Figure 3, forms an island surrounded by major transport infrastructure and consists of a former out-of-town retail park with associated parking. The retail development comprised 9600 m<sup>2</sup> of A1/A3 floorspace.



Figure 1: Former Comet building



Figure 2: Former TGI Friday

- 2.2 Consisting of large single buildings exhibiting a coarse grain of built form without an overarching urban structure, the retail park falls within the primary typology of a box development as set out in the Barnet Characterisation Study.
- 2.3 The retail buildings occupied the northern part of the site. Existing buildings are considered to be architecturally poor and do not contribute to the character and appearance of Mill Hill. The site is not subject to any other Local Plan designation, is not part of a conservation area and there are no listed buildings on site.



Figure 3: Existing site shown in red dashed line

## Site History

2.4 The site has a short development history. The Pentavia Retail Park was built in the early 1990s following planning consent in 1988 for a scheme comprising non-food retail warehouses, a garden centre and petrol station. Prior to 1988 the site had been used as allotments and a sports ground as well as a construction site for the M1. Recent relevant planning applications have been listed in Appendix 3. These include the most recently approved full planning applications for this site (14/08075/FUL, 15/01820/FUL and 15/01825/FUL) and a certificate of Lawful Development (W00408BQ/06) allowed at appeal in 2008 (appeal reference APP/N5090/X/07/2034877) which confirms the lawful use of units to be any use within the A1 Class. The historical development of the site over the last 150 years is shown in Figures 4, 5, 6 and 7. The isolation of the Pentavia site was clearly the product of the development of the A1 / A41 and M1.

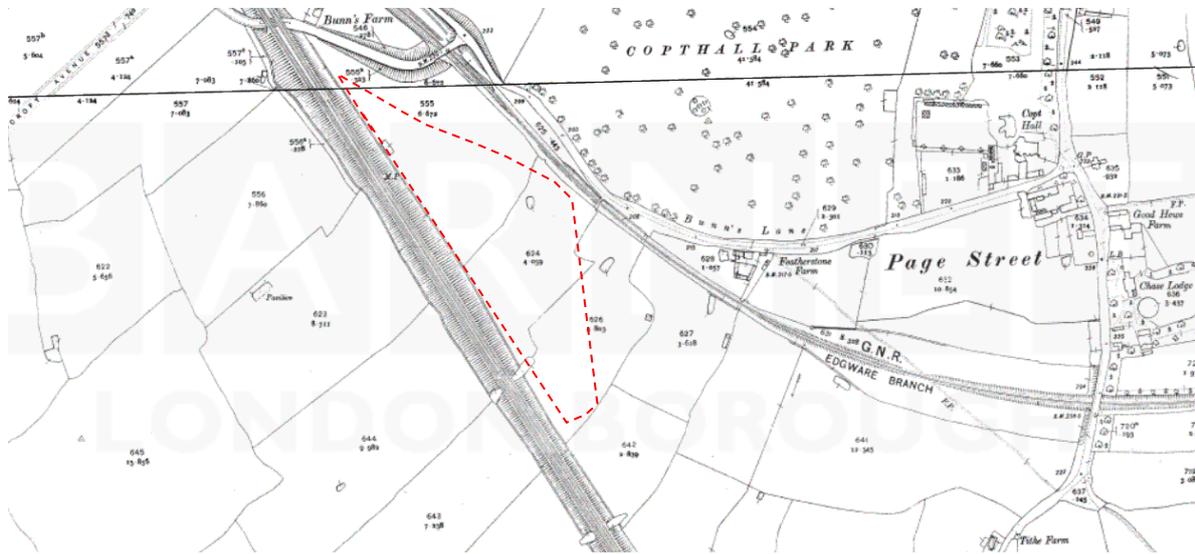


Figure 4: Map showing site between 1865-1894, before construction of A1 / A41

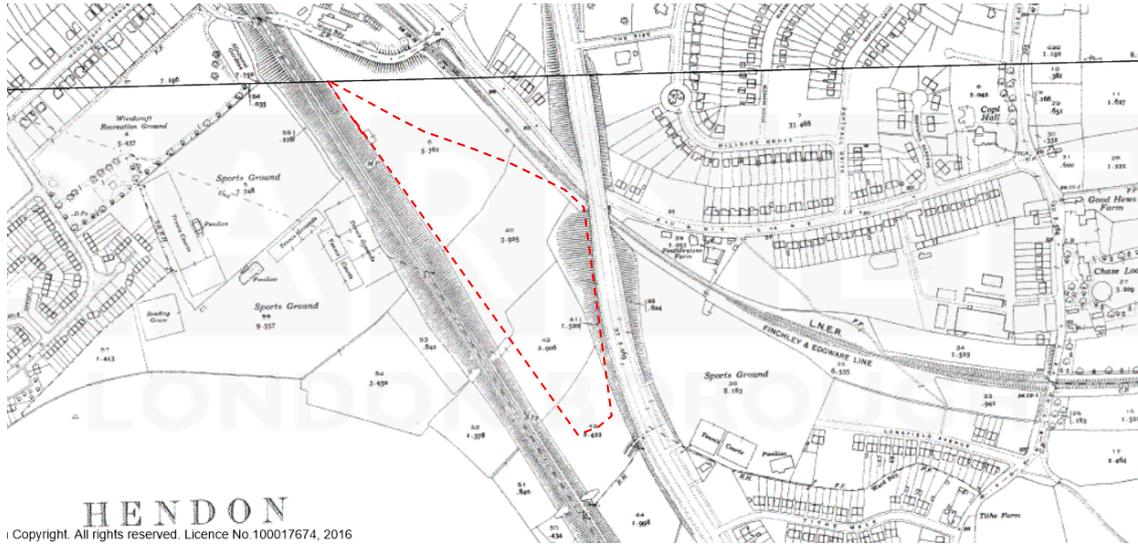


Figure 5: Map showing agricultural uses from 1932-1941

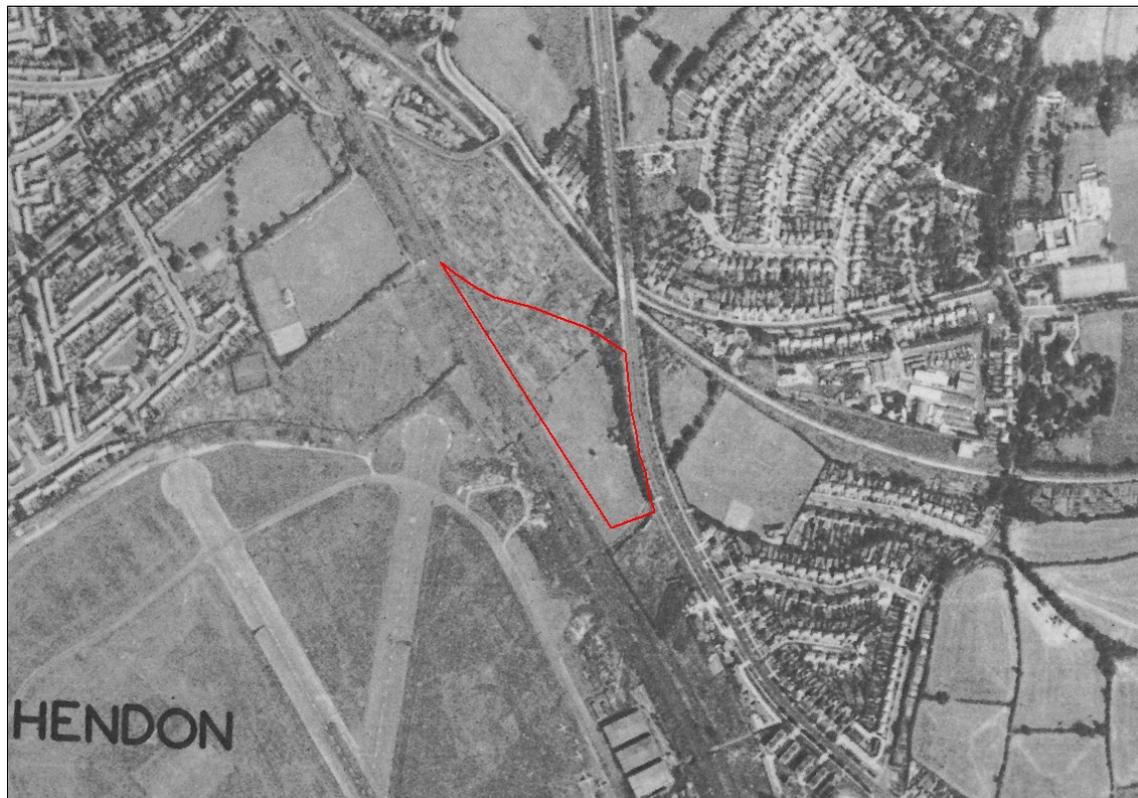


Figure 6: Aerial photograph 1945

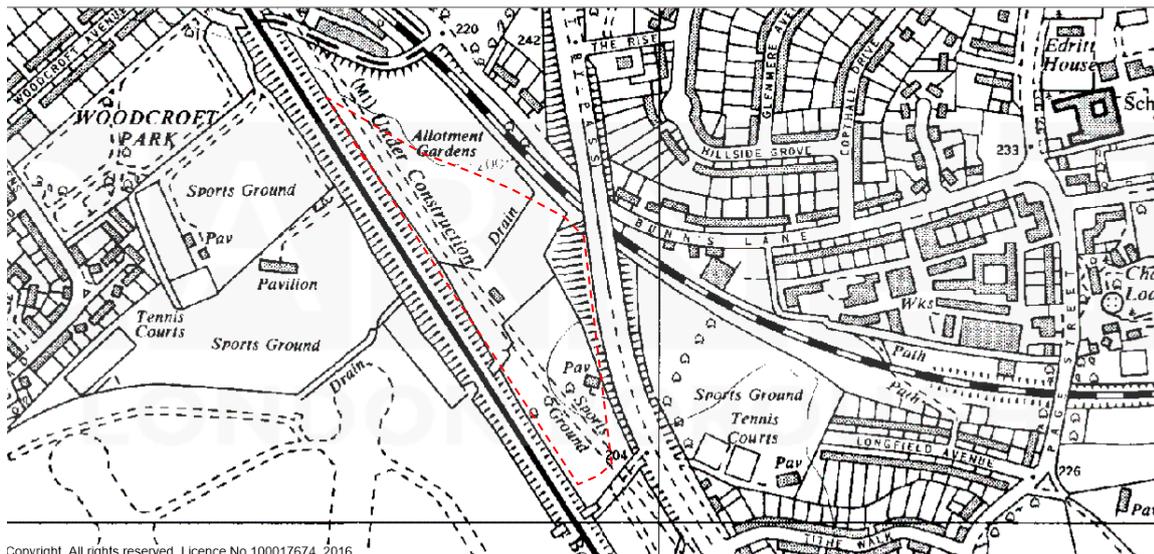


Figure 7: Map show site between 1958-1968 with allotment and sports uses

2.5 Like many out of town centre retail parks in London, the Pentavia site became outmoded as national planning policy and investment has been directed towards the renewal of town centres, focusing on making such centres of historic trade more vibrant and vital places which are accessible by a range of sustainable transport modes. With an emphasis on car trips combined with constraints linked to the access to and from the A1 / A41, the Pentavia Retail Park is considered to have failed as a modern and sustainable development. Up until 2015 the site had been occupied by major national retailers including Homebase, Comet and Argos (Use Class A1). Since September 2015 the site has been temporarily occupied by Koshier Outlet Store. The TGI Friday restaurant (Use Class A3) is now closed.

### Built Character of the Surrounding Area

- 2.6 The former retail park site is adjoined by A1 / A41 to the east and the M1 to the west.
- 2.7 To the north west of the Pentavia site are Bunns Lane and the route of the former rail link between Mill Hill East and Edgware. Between Pentavia and Bunns Lane there is a new 34 unit residential development, Churchill Place, which was approved in 2013 (planning reference H/02796/11) and completed in 2016. The impact on this new adjoining residential area will be a key consideration in determining the acceptability of proposals for the site subject to this Planning Brief.
- 2.8 Further to the north of Bunns Lane are the Mill Hill Industrial Estate and Bunns Lane Works. Both of these sites are designated as Locally Significant Industrial Sites in the Local Plan.
- 2.9 Mill Hill Town Centre is 0.8 miles from Pentavia (about 16 minutes walk). The residential areas to the west of the site consist of two storey houses. To the south

west (about 300 metres away) is the Watling Estate Conservation Area which typically consists of rows of two storey terraced dwellings or pairs of semi-detached properties with pitched roofs. Residential also characterises the east of the site with several blocks of flats of three to four storeys. To the south there is a BP petrol station and a car dealership West Way Nissan at 517 Watford Way showroom, together with slip roads connected to the A1 / A41. This narrow neck of land is closest to the M1 and A1 / A41.

### 3 Planning Policy Framework

- 3.1 The Barnet statutory development plan is the 2012 Local Plan Core Strategy and Development Management Policies, alongside the 2016 London Plan (consolidated with alterations since 2011) which was published in March 2016. Regard has to be had to the National Planning Policy Framework (NPPF) in decision making.
- 3.2 The site is within the Mill Hill Neighbourhood Plan Area. The Mill Hill Neighbourhood Forum is in the early stages of producing a Neighbourhood Plan. The emerging Mill Hill Neighbourhood Plan will, subject to adoption, eventually form part of Barnet's development plan. Should this be in place when an application is considered it will be a material consideration.
- 3.3 Rather than repeat policies as part of the Brief, a Planning Policy Matrix has been produced to highlight the main planning issues for consideration and enable cross-reference to relevant parts of the Local Plan, London Plan and the National Planning Policy Framework (NPPF). The Matrix is set out in **Appendix 1**. The key policy issues relevant to the site are housing, employment, transport, design, environmental quality and community uses. These are summarised below.

#### National Planning Policy Framework (NPPF)

- 3.4 The NPPF sets down the Government's planning policies for England and how they expect these to be applied to all forms of development. There is a presumption in favour of sustainable development which will be achieved if development is in line with the NPPF policies and objectives. The Core Planning Principles of the NPPF states that planning should '*promote mixed use developments, and encourage multiple benefits from the use of land in urban and rural areas*'.
- 3.5 Paragraph 58 sets out the following aims for the design requirements for development that will:
- function well and add to the overall quality of the area, not just for the short term but over the lifetime of the development;
  - establish a strong sense of place, using streetscapes and buildings to create attractive and comfortable places to live, work and visit;
  - optimise the potential of the site to accommodate development, create and sustain an appropriate mix of uses (including incorporation of green and other public space as part of developments) and support local facilities and transport networks;
  - respond to local character and history, and reflect the identity of local surroundings and materials, while not preventing or discouraging appropriate innovation;

- create safe and accessible environments where crime and disorder, and the fear of crime, do not undermine quality of life or community cohesion; and
  - be visually attractive as a result of good architecture and appropriate landscaping.
- 3.6 The NPPF states at paragraph 59 that design policies should avoid unnecessary prescription or detail and should not attempt to impose architectural styles or particular tastes.

## **London Plan 2016**

### *Residential Uses*

- 3.7 **Policy 3.5 Quality and Design of Housing Developments** requires that housing developments should be of the highest quality internally, externally and in relation to their context and the wider environment. The design of all new housing developments should enhance the quality of local places, taking into account physical context; local character; density; tenure and land use mix; and relationships with, and provision of, public, communal and open spaces, addressing in particular the needs of children and older people.
- 3.8 **Policy 3.8 Housing Choice** also requires that new developments offer a range of housing choices, in terms of the mix of housing sizes and types, taking account of the housing requirements of different groups and the changing roles of different sectors in meeting these. The 2016 London Plan specifically highlights in Policy 3.8 that the planning system should provide positive and practical support to sustain the contribution of the Private Rented Sector (PRS) in addressing housing needs and increasing housing delivery.

### *Open Space*

- 3.9 **Policy 3.6 Children and Young People's Play and Infant Recreation Facilities** requires that all children and young people have safe access to good quality, well-designed, secure and stimulating play and informal recreation provision, incorporating trees and greenery wherever possible. The quantum is dependent on the final mix of unit sizes; further detail is contained in the Barnet Local Plan Development Management Policies and Barnet Planning Obligations SPD.

### *Economic Uses*

- 3.10 **Policy 2.7 Outer London: Economy** supports consolidating and developing the strengths of outer London's office market through mixed use redevelopment and encouraging new provision in competitive locations.
- 3.11 **Policy 4.1 Developing London's Economy** states that the Mayor will promote and enable the continued development of a strong and increasingly diverse economy

across all parts of London, ensuring the availability of sufficient and suitable workspaces including suitable environments for small and medium sized enterprises.

- 3.12 **Policy 4.7 Retail and Town Centre Development** highlights that boroughs should firmly resist inappropriate out of centre development and manage existing out of centre retail and leisure development in line with the sequential approach, seeking to reduce car dependency, improve public transport, cycling and walking access and promote more sustainable forms of development.
- 3.13 **Policy 4.10 New and Emerging Economic Sectors** encourages boroughs to work with developers to ensure availability of a range of workspaces, including start-up space, co-working space and 'grow-on' space.

### **Barnet's Local Plan Policies**

#### *Residential Uses*

3.14 **Policy 3.5: Quality and design of housing developments**

The design of all new housing developments should enhance the quality of local places, taking into account physical context; local character; density; tenure and land use mix; and relationships with, and provision of, public, communal and open spaces, taking particular account of the needs of children, disabled and older people.

Table 3.3 outlines the minimum space standards for new dwellings.

- 3.15 **Policy CS4: Providing quality homes and housing choice in Barnet** seeks to ensure a mix of housing products in the affordable and market sectors to provide choice for all households. New developments should provide a range of dwelling sizes and types of housing including family homes which does not undermine suburban character or local distinctiveness. Affordable Housing should be provided in line with the Council's strategic borough-wide target of 40% provision, subject to viability, for all new homes with a tenure mix of 60% social rented and 40% intermediate. In accordance with the London Plan, affordable housing should normally be provided on-site. In exceptional cases where it can be demonstrated robustly that this is not appropriate, it may be provided off-site.
- 3.16 Any affordable housing proposal which does not meet the Council's policy will need to be supported by a Viability Assessment. The Council expects the developer to enter into dialogue regarding the proposed level of affordable housing to be provided prior to the submission of a planning application and after the Council has been supplied with sufficient detail of the proposed scheme so that it can carry out its own assessment. This will help agree the assumptions to be included in a viability assessment reach an early agreement on the level of provision and avoid a protracted S106 negotiation.

- 3.17 **Policy DM08: Ensuring a variety of sizes of new homes to meet housing need** recognises that the development should include a mix of residential units. Maintaining and increasing the supply of family housing is a priority in Barnet. Barnet's Housing Strategy 2015 recognises the market's pre-disposition to provide 1 and 2 bedroom units, and maintains the priority for family homes across all tenures.
- 3.18 **Policy CS5: Protecting and enhancing Barnet's character to create high quality places** means that the Council seeks to ensure development in Barnet respects local context and distinctive local character creating places and buildings of high quality design. All development should maximise the opportunity for community diversity, inclusion and cohesion and should contribute to people's sense of place, safety and security.
- 3.19 Given the proximity of the Watling Estate Conservation Area and potential for visual impact in relation to Mill Hill Conservation Area, we highlight the requirement of Policy CS5 that we will require proposals within or affecting the setting of heritage assets to provide a site assessment which demonstrates how the proposal will respect and enhance the asset.
- 3.20 Policy CS5 identifies eight strategic locations in the Borough where Tall Buildings (8 storeys (or 26 metres) or more) may be appropriate. Pentavia Retail Park is not one of these locations.

### 3.21 **Policy DM05: Tall buildings**

Tall buildings outside the strategic locations identified in the Core Strategy will not be considered acceptable. Proposals for tall buildings will need to demonstrate:

- i. an active street frontage where appropriate
- ii. successful integration into the existing urban fabric
- iii. a regard to topography and no adverse impact on Local Viewing Corridors, local views and the skyline
- iv. not cause harm to heritage assets and their setting
- v. that the potential microclimatic effect does not adversely affect existing levels of comfort in the public realm.

#### *Town Centre Uses*

- 3.22 National guidance defines the main town centre uses. This definition includes retail development, leisure, entertainment facilities such as cinemas, restaurants, pubs, offices and theatres, museums and hotels.
- 3.22 Town centre first has been firmly established as national planning policy for more than 20 years. On this basis Local Plan policies are clear in demonstrating which uses are more appropriately located in Barnet's town centres.
- 3.23 Pentavia has not been successful as an out of centre retail park and the Council's objective remains to promote its network of town centres. It therefore does not

support any enhancement of this out of centre location in terms of uses such as retail and leisure that make the development a destination.

- 3.24 Mill Hill town centre is one of Barnet's district centres and given moderate levels of demand for retail, leisure or office floorspace combined with transport capacity is considered to have medium growth potential according to the London Plan.
- 3.25 **Policy CS6: Promoting Barnet's Town Centres** states that we will promote successful and vibrant centres throughout Barnet to serve the needs of residents, workers and visitors and ensure that new development is of an appropriate scale and character for the centre in which it is located;
- 3.26 **Policy DM11: Development principles for Barnet's town centres** states significant new retail and other appropriate town centre uses outside the town centres or any expansion of existing out of centre sites will be strongly resisted unless they can meet the sequential approach and tests set out in the NPPF or are identified in an adopted Area Action Plan. Edge of centre proposals will not normally be appropriate and therefore should demonstrate why they are not locating in a town centre site. Appropriate mixed use re-development will be expected to provide re-provision of employment use, residential and community use.

#### *Employment Uses*

- 3.27 **Policy CS8: Promoting a strong and prosperous Barnet** states that we will support businesses by encouraging development that improves the quality of existing employment provision. CS8 also highlights that in order to support small to medium sized enterprises new employment provision should include a range of unit sizes and types such as affordable and flexible workspaces and home working hubs. This policy also states that we will require major developments to provide financial contributions to and deliver employment and training initiatives. Further details are set out in the Supplementary Planning Document on Delivering Skills, Employment, Enterprise and Training (SEET) from Development through S106.
- 3.28 **Entrepreneurial Barnet 2015-2020** states that many of the borough's businesses are owned by residents and a significant proportion of our residents (around 40%) work locally. Entrepreneurial Barnet also identifies Mill Hill as an area for growth. This document goes on to state that this growth will create new opportunities for businesses looking to start-up, invest and grow, and for local people to find new jobs and develop new skills.

## **4 Constraints**

4.1 The following constraints will need to be addressed in any future development:

- Levels
- Mill Hill and Watling Estate Conservation Areas
- Site permeability and accessibility
- Environmental Factors

4.2 A Constraints Plan is set out at para 4.13.

### **Levels**

4.3 The extent of level changes across the site is currently not known. Topographical drawings/surveys will therefore need to be provided in the event of an application. These drawings should include cross sections showing the relationship between proposed developments and adjoining built environments. Observations of the site indicate that there are no significant level changes on the site itself. However, there are significant level differences between the site and surrounding areas. This is particularly significant at the northern boundary close to which lies Churchill Place; and the western boundary towards Grahame Park Way.

4.4 These level changes may have an impact on any new development achievable within the site, which will need to be addressed with any redevelopment proposal especially in terms of privacy and overlooking.

### **Mill Hill and Watling Estate Conservation Areas (adjoining building scale)**

4.5 The Mill Hill Conservation Area sits atop Mill Hill extending round to Holcombe Hill and Highwood Hill. Although Pentavia does not fall within this Conservation Area, there is an impact in terms of views from the Conservation Area (see Mill Hill Conservation Area Character Appraisal, April 2008) which is on higher ground. Pentavia is in a location surrounded by low rise suburban housing. Relevant viewpoints include the view from Mill Field, a public open space located within the Conservation Area together with the view from St Joseph's Missionary College that sits on the adjacent hillside. In both cases Pentavia Retail Park lies to the south and any denser form of development would act as a predominant impression on the skyline from these locations.



*Figure 8: View of the site from Mill Hill field*

- 4.6 The Watling Estate Conservation Area is located within 300 metres of the Pentavia Retail Park. This Conservation Area is characterised by small scale two storey properties, which form pairs of semi-detached properties or rows of terraces. The proximity to the Watling Estate Conservation Area boundary coupled with the elevated nature of the site means that there is potential for any proposed development to impact on the setting of this Conservation Area. Any proposed development will therefore need to have due regard to character and appearance (see Watling Estate Conservation Area Character Appraisal, July 2007) and must not have a harmful impact on views of the Watling Estate and its setting.

### **Site Permeability and Accessibility**

- 4.7 At present there is only one vehicular entrance to the site from the A1 / A41 Watford Way. As the A1 / A41 is a dual carriage way, this entrance is one way in, one way out. The exit is northbound only, and in order for vehicles leaving the site to travel in a southerly direction, they have to turn right at the junction at Mill Hill Broadway. This access arrangement presents a significant obstacle to the redevelopment of the site and the improvement of public transport accessibility for the site.
- 4.8 In terms of pedestrian access the only opportunity for pedestrians to cross the southbound carriageway of the A1 / A41 is either the four flights of stairs (two down and two up again) via Bunns Lane (see Figure 10) or to go via the subway adjacent to the West Way Nissan car dealership (also multiple flights of stairs).

- 4.9 To the southwest there is a pedestrian bridge (see Figure 9) which crosses over the M1 and then goes underneath the Midland Mainline via a pedestrian tunnel providing a connection to the former site of Barnet College. This pedestrian bridge has step and ramp access potentially making it suitable for bicycles.



Figure 9: Pedestrian bridge over M1



Figure 10: External stairs connecting Watford Way to Bunns Lane

## Environmental Factors

- 4.10 Due to the site's proximity to the M1, A1 / A41 and Midland Mainline, the site is exposed to poor air quality, high levels of particulate and severe acoustic problems. Measurements taken on site show that National Air Quality Objectives for Nitrogen Dioxide and Particulate Matter (PM10) are exceeded.
- 4.11 Detailed mapping of particulates across the site will be required due to its constrained nature between transport corridors. Furthermore, an on-site assessment will be required to identify if more permanent measuring systems and controls to limit health risks are required in order to ensure proposed uses support improvement of health and wellbeing as envisioned within the Council's Health and Wellbeing Strategy.
- 4.12 The Environment Agency have identified that the site is located on a historic landfill site and appears to be subject to past activity which poses a high risk of pollution to controlled waters. Issues relating to ground stability and contamination will be considered at the application stage. Further investigation is therefore merited.

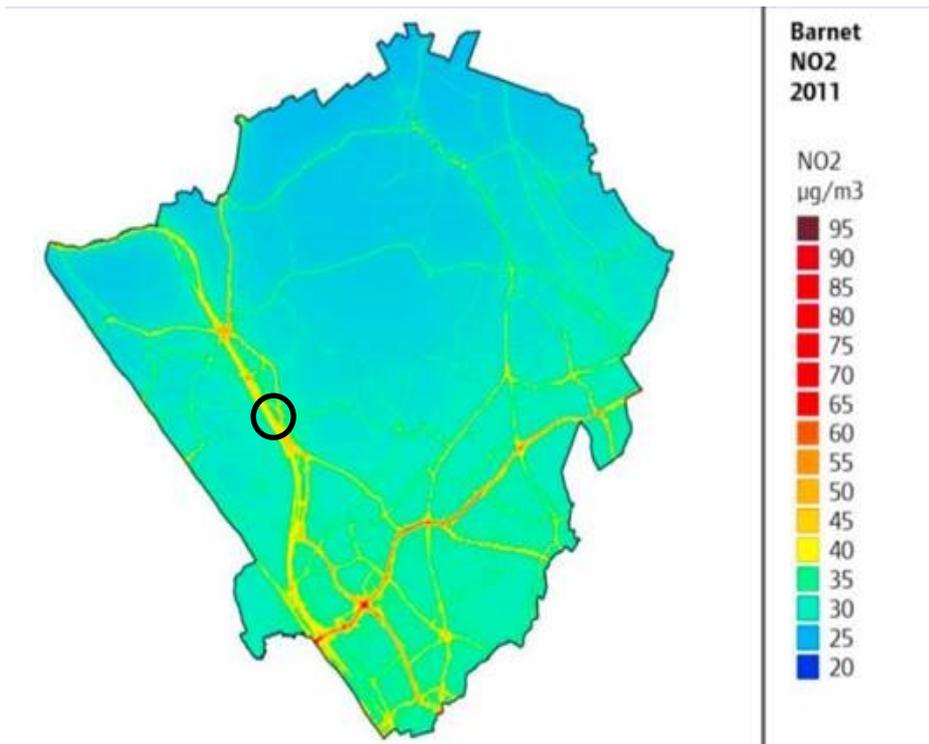


Figure 11: NO<sub>2</sub> emissions within Barnet (Pentavia site circled)

## Constraints Plan

4.13 The main constraints are shown on the below plan:



Figure 12: Site Constraints

## **5 Relationship with Surrounding Area**

### **Adjoining Sites**

- 5.1 Due to adjoining strategic transport infrastructure that acts more as a barrier than a connection for the site, the site itself only directly borders other forms of development to the north and south. These strategic transport infrastructure barriers predominantly impact on pedestrian and cycle connections between the site and its surroundings.
- 5.2 The only residential area bordering this site is the new development at Churchill Place. Churchill Place directly adjoins the M1 and Midland Mainline and has environmental issues from being exposed to noise and air pollution. However, Churchill Place also benefits from its location bordering Bunns Lane with Mill Hill Park directly opposite and the disused railway line woodland buffer to the rear sitting between the residential properties and the Pentavia Retail Park.
- 5.3 Individual residential properties on this site have been protected from the transport corridors through the installation of sound proof walling, which runs along the western boundary. As outlined above, the Churchill Place development is downslope of the site. Topographical / cross sectional drawings will need to be submitted for the Pentavia site in order to ascertain the extent of the level change.
- 5.4 Bunns Lane provides the closest route from the site to the nearest local town centre, Mill Hill. The only link between the Pentavia site and Bunns Lane is a set of pedestrian stairs which lies to the north of the site accessed via Watford Way. Access improvements in and around this location would be essential to enabling any residential development to be considered within the site instead of the current limit to such development defined by Churchill Place.



*Figure 13: Churchill Place properties fronting Bunns Lane*

- 5.5 To the east of the site is the A1 / A41 dual carriageway; beyond this road is a disused exit ramp from the M1 that formerly enabled direct connection from the M1 into the A41 at this location. Adjacent to this are low rise houses that are screened from the A1 / A41 and Pentavia by existing mature trees. These properties would be sensitive to matters of building height and massing.
- 5.6 To the south are the West Way Nissan dealership and the BP petrol station. These sites are squeezed between the transport corridors as they gradually come together at Junction 2 of the M1. The considerations associated with these corridors become increasingly significant as one travels from north to south through the site.



*Figure 14: West Way Nissan dealership – 517 Watford Way*

- 5.7 Around 100 metres to the west of Pentavia is Grahame Park Way which consists of two storey terraced and semi-detached houses together with public open space at

Woodcroft Park. This area falls within the Colindale Regeneration Area identified as an Opportunity Area in the London Plan and subject to the Colindale Area Action Plan adopted in 2010. Colindale is expected to deliver a minimum of 12,500 new homes before 2031. The area of Grahame Park Way closest to Pentavia is not identified as a development site in the Area Action Plan. However it is adjacent to the Grahame Park Way Corridor of Change which focuses on the regeneration of the Grahame Park Estate and the site at Barnet College. Further detail on the master planning of the Grahame Park Estate is set out in the Grahame Park Supplementary Planning Document adopted in May 2016. The relationship with Grahame Park is another key consideration for any future development of Pentavia.

- 5.8 There appears to be significant level changes between the site and Grahame Park Way. This requires further investigation. It is, however, anticipated that this area of low rise residential housing may be affected by any future development on the Pentavia site. Again careful consideration will need to be given to building height and mass as well as setback distances at this boundary.

### **Connectivity**

- 5.9 The Pentavia site has a PTAL rating of 1b. There is a bus stop directly outside the site on the A1 / A41 Watford Way which serves routes 113 and N113. Both these buses serve Mill Hill and Hendon on a route that runs from Edgware to Marble Arch on the 113 route and to Trafalgar Square on the N113 route at a frequency of every 6-11 minutes during peak times. A key consideration for any future development is making effective use of this bus route improving the poor connectivity from the site to the bus stops along the northbound and southbound carriageways of Watford Way. The bus stop at Bunns Hill Bridge serving destinations to the south including Hendon is closer to the Pentavia site than the northbound bus stops serving Mill Hill and Edgware.
- 5.10 The other accessible bus route is the 221 that runs along Bunns Lane. This route serves both Mill Hill Broadway and Mill Hill East stations with a frequency of every 4-6 minutes during peak times. The lack of direct access to Bunns Lane and the 221 bus service needs to be considered in any future proposal for the Pentavia site. Even with improvements to accessibility, the variation across the site is likely to be significant in defining the approach to layout and the nature of any proposed development.
- 5.11 The nearest rail station is Mill Hill Broadway which is 0.9 miles from the site when accessed by the external stairs to the north of the site (17 minutes' walk). The nearest underground station is Colindale a distance of 1.3 miles which is accessed via the footbridge over the M1 and pedestrian tunnel under the Midland Mainline, followed by a 15 minute walk along Grahame Park Way and Colindale Avenue.

5.12 Due to the low PTAL rating combined with difficult pedestrian and cycling linkages, plus the potential for parking overspill, any future development will need to both improve these access routes and also provide suitable car parking that complies with the Council's parking standards as outlined in Policy DM17 Travel Impact and Parking Standards. The Policy requires:

- i. 2 to 1.5 spaces per unit for detached and semi-detached houses and flats (4 or more bedrooms);*
- ii. 1.5 to 1 spaces per unit for terraced houses and flats (2 to 3 bedrooms); and*
- iii. 1 to less than 1 space per unit for development consisting mainly of flats (1 bedroom)*

5.13 The area is already dominated by adjacent vehicle corridors, therefore the impact of parking on internal streetscape within the site should be minimised to ensure a high quality of environment and landscaping. We recommend strong consideration is given to the use of basement parking.

## 6 Approaches to Redevelopment

### Land use

- 6.1 This is a site largely surrounded by barriers in the form of major transport routes which limit permeability and accessibility. Due to these restrictions, careful consideration must be given regarding appropriate uses for any future development to ensure that they do not result in a level of movement into and out of the site which has a detrimental impact on surrounding road networks.
- 6.2 Although there have been no previous residential uses on this site, there are residential areas to the north, east and west of the site. Residential use as part of a mixed use development is considered appropriate for the site. The Council recognises that as housing need increases new innovative and non-conventional housing products will come forward. Given the environmental constraints of this location the Council will consider well-designed, high quality products which help to widen housing choice. We will support such products on the basis that they:
- demonstrate how they meet identified housing needs and contribute to the delivery of mixed and balanced communities;
  - contribute to the maximum reasonable amount of affordable housing in line with Local Plan and London Plan policies;
  - comply with Housing Act standards and requirements;
  - demonstrate effective management arrangements, lettings policies and support services for occupiers;
  - do not have a negative impact on surrounding neighbourhoods and
  - are not converted to student accommodation, HMO, hotel or temporary homeless accommodation without planning consent.
- 6.3 Flexible business uses as part of a mixed use scheme would be appropriate. Any future development would need to provide a range of unit sizes and tenures to meet a variety of business needs.
- 6.4 Figure 15 shows the proposed location of different uses within the site. This zoning plan is indicative and shows the locations of suitable uses as opposed to the full extent that these uses can occupy which will be determined at the application stage. Due to the narrowing of the site at the southern end and the proximity of adjoining major infrastructure on both sides, residential uses should not be located where the site is less than approximately 70 metres wide. This will ensure that sufficient buffer zones are able to be implemented and privacy distances maintained. It is therefore suggested that the narrowest part of the site is occupied by employment space as this is not subject to the same environmental standards as residential. The Council will support provision of a range of new business spaces that are both flexible and

affordable, providing the conditions for start-ups to grow and to enable existing small to medium enterprises to prosper.

6.5 The scale of development also triggers a requirement to manage development related job opportunities. The Council will use a Local Employment Agreement (LEA) to manage such opportunities. A LEA sets out the skills, employment and training opportunities to be delivered from development and must include all employment opportunities generated by construction as well as the end use where the development creates more than 20 FTE (full time employee) jobs.

**(i) Impact on transport corridors and access**

6.6 It is important that future uses do not result in a level of vehicular movement into and out of the site which has a detrimental impact on surrounding road networks, particularly where they are already congested at peak times.

6.7 The introduction of residential land uses would be subject to demonstrating the ability to provide suitable accessibility for future residents through the creation of new and improved vehicular and transport connections, alongside improvements to cycling and pedestrian access and choice. The site should promote active travel as this has a direct health benefit to residents. Applications should refer to TfL’s *Improving the health of Londoners: Transport Action Plan*.

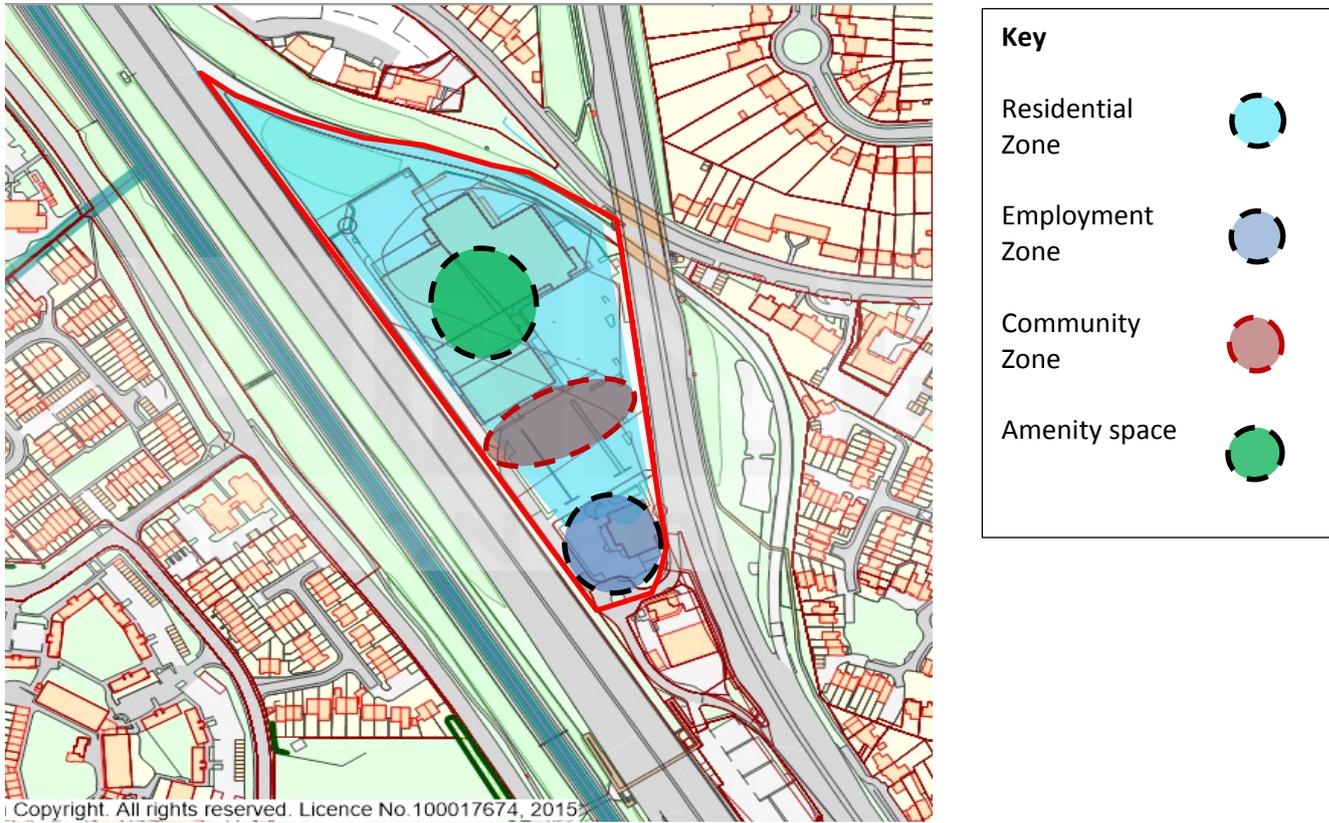


Figure 15: Zoning Map

## **(ii) Suitability of the environmental context**

- 6.8 The suitability of different land uses within the site is highly influenced by the environmental constraints highlighted earlier. Suitability for any residential use is a key consideration. Proven mitigation measures and controls need to be in place to give certainty that the environmental issues resulting from the adjoining transport routes and poor permeability will not affect the health and wellbeing of residents and employees. The Council's Joint Strategic Needs Assessment and Strategy identifies that the cost of health services for individuals and their life expectancy are strongly related to the broad environmental context in which they live.
- 6.9 If residential development is to be provided on site, this will need to be as part of a mixed use development. It is important that, in order to comply with the objectives of the National Planning Policy Framework (NPPF) which seeks sustainable, inclusive and mixed communities, the new residential properties should be supported by a range of on-site community and retail uses. These uses should be ancillary to the residential elements of the mixed use development and not form a destination in themselves.

## **(iii) Designing for a changing economy**

- 6.10 Flexible business uses as part of a mixed use scheme would be appropriate. Any future development would need to provide a range of unit sizes and tenures to meet a variety of business needs.
- 6.11 The Council will expect new business space to be designed in order to provide larger spaces that can be easily sub-divided, changed and re-used in a variety of ways over time to adjust to the changing nature of business within the wider economy. Affordable workshop spaces are particularly sought after within the local economy; but whatever provision is proposed it should consider the importance of a balance of suitable internal and external spaces, quality ventilation arrangements and arrangements such as loading areas and parking.
- 6.12 The site is not located within a town centre and therefore the business uses should be appropriate to the lower public transport accessibility of the site.

## **Urban Form and Character**

### **(i) Responding to the local built form and skyline**

- 6.13 The current form of development on site consists of low rise, warehouse style buildings with large footprints of 8200 m<sup>2</sup> (this figure does not include internal floorspace of the warehouse buildings or the footprint of the TGI Friday building). As the site is separated from surrounding built environments by major transport

infrastructure, there is an opportunity to create a distinctive built form which can help to inform and instruct the 'place making' essential for any residential development.

- 6.14 Local Plan policies CS5 and DM6 set out the Council's approach to managing tall buildings in Barnet. There is a clear direction that they should be restricted to strategic locations within the Borough. As this site is not within a strategic location, tall buildings of 8 storeys or more in height will not be supported.
- 6.15 Any development proposals for Pentavia should demonstrate successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors identified in Map 8 of the Local Plan Core Strategy, local views and the skyline. 'Viewing Corridor A' passes close to the site and therefore the impact of proposed development on the context of this view and adjacent views will be given particular attention. Any application will need to include view visualisations to show the impact of the proposal on the skyline and local character. These views should be agreed with the Local Authority in advance of submitting the application. In addition, overshadowing drawings will also need to be provided to show the extent of overshadowing.
- 6.16 Density should have regard to Table 3.2 of the London Plan, which guides density in terms of the surrounding character of the area, and access to public transport.
- 6.17 The proximity of the site to low rise residential areas of Grahame Park Way to the west, Bunns Lane to the north and Mill Hill to the east, entails that the height of any new build should not have a detrimental impact on these neighbouring properties in terms of overbearing and overshadowing.
- 6.18 As the site is highly visible from these locations as well as the Watling Estate and Mill Hill Conservation Areas, the appearance of the development in terms of height, mass and bulk of any new buildings will require careful consideration so as not to appear excessively dominant within this low rise landscape.
- 6.19 Particular consideration will need to be given to visible elevations, as the appearance of untreated walls will be detrimental to the views. The treatment of visible elevations should utilize modern building techniques in order to make any visible proposed structures more pleasing to the eye whilst ensuring overall legibility of the views from all adjacent areas. It should however be noted that the quality of appearance of elevations will not overcome any detrimental impacts of overshadowing, over-bearing appearance of negative impact on skyline.
- 6.20 Any development proposals should further account for roofline interest, by varying the height of structures in the appropriate places. This should stem from detailed massing and view studies of the proposed buildings. A monotonous roofline motif will have a detrimental impact on surrounding areas. However some roofline interest

might frame the sky exposure of views from adjacent areas and make any structures less overbearing.

6.21 The safety of future residents is of key importance. Site security is a key consideration and any future proposal should be designed in line with secured by design principles. Development proposals should contribute to the minimisation of potential physical risks, specifically fire. Appropriate mitigation measures will need to be implemented including means of escape, domestic sprinklers or suitable fire engineering in line with London Plan policy 7.13. In the event that an application is submitted the London Fire Brigade will be consulted as part of the appraisal process.

**(ii) Responding to the environmental context**

6.21 If the site is to be occupied by residential uses, appropriate mitigation measures will need to be installed to ensure that future residents are not exposed to detrimental levels of noise and air pollution. The Council's Environmental Health department will assess the proposed mitigation measures. Mitigation measures will need to be designed into the development to ensure that residential units are not exposed to noise levels exceeding 55db nor poor air quality.

6.22 As well as consideration of external mitigation measures such as noise barriers, building design techniques and green buffers, the design of the scheme will need to be considered carefully to determine if the built structures proposed can in fact provide sufficient mitigation to overcome the environmental problems and provide satisfactory screening to noise and air pollution. Buffers would need to be of a suitable density, length and height to reduce noise inside the site to have an acoustic benefit.

6.23 The internal layout of units will also need to be carefully considered to ensure that main habitable rooms are not exposed to more sensitive locations and single aspect units do not face onto transport infrastructure.

6.24 Any proposed street lighting will require 0% light uplift. This will ensure that any future development will not result in sky glare'

## **7 Details to be considered**

### **Privacy and overlooking**

- 7.1 Any proposed development should respond to nearby residential properties in terms of their height and proximity to adjoining boundaries with a view to avoiding loss of privacy. In new residential development there should be a minimum distance of 21 metres between properties with facing windows to habitable rooms to avoid overlooking, and 10.5 metres to a neighbouring garden. Cross section drawings should be submitted as part of any future application showing the relationship with the new development and adjoining roads and housing.

### **Outdoor Amenity Space**

- 7.2 Provision of outdoor amenity space is vital in Barnet and is a key consideration for new residential developments. Gardens/outdoor amenity spaces make a significant contribution to local character, specifically towards biodiversity, tranquillity, amenity, setting and sense of space.
- 7.3 Any proposed development will need to meet the minimum outdoor amenity space standards as outlined in Barnet Council's Sustainable Design and Construction SPD (adopted 2016). The location of this amenity space, within the site, will need to be carefully considered in terms of the surrounding uses to ensure that proposed amenity space provides appropriate space for residents as well as employees. Private gardens should not be overlooked and all amenity space must be sheltered from surrounding major forms of transport infrastructure to provide suitable spaces.
- 7.4 The incorporation of high quality soft landscaping into the proposed street scene will be important to ensure visual interest and seasonal diversity of any new development. A key part of this will be the introduction of trees to the site. Particular attention being given to their location, function, and sufficient maturity and variety of ages to ensure the benefits are experienced early in the life of the development. Soft landscaping will be important to provide relief and privacy screening. Particular attention should be paid to the boundaries between the site and the adjoining Bunns Lane development as this will impact on both the development and the quality of life for those existing residents. Recent research shows that increasing tree cover in urban areas by 10 % reduces surface water run-off by almost 6%. The implementation of trees across the site is very important to reduce the risk of on-site flooding. Increasing tree cover in urban areas can help mitigate the urban heat island through direct shading and by reducing ambient air temperature through the cooling effect of water evaporation from the soil via plant leaves. The shading provided by trees can also reduce energy use for heating and cooling buildings.

- 7.5 It is recognised that in order to ensure a high quality redevelopment is delivered that secures an excellent quality of streetscape; the soft landscaping, refuse and parking measures will all need to be considered in detail at the planning application stage rather than being dealt with through a condition. This is essential to enable assessment of the capability of these features to support the objectives of the scheme as a whole; and thus the suitability of the overall scheme design.

### **Building heights and bulk**

- 7.6 The site is separated from other adjoining residential areas by major transport infrastructure and therefore there is the opportunity to construct a distinctive built form that utilises modern building techniques to mitigate constraints and deliver an efficient and flexible form of development for the site.
- 7.7 This site is elevated above the surrounding area and is visible from a number of locations including Mill Hill Village and the Watling Estate, as well as a number of parks and recreation areas. For this reason, any proposed redevelopment incorporating blocks of 4 to 7 storeys will be predominant. The design must not appear overbearing on the Barnet skyline nor to adjoining residential areas and as noted previous must give full and due consideration. A scheme that is over-engineered and designed primarily to mitigate these constraints over other design considerations will not be acceptable.
- 7.8 Lastly, it will be important to bear in mind the nearby context of the Mill Hill Observatory run by the University College London. By ensuring appropriate built form (height and massing) any development should avoid artificial light impacting on the operation of the observatory due to the direct line of sight across Mill Hill Park.

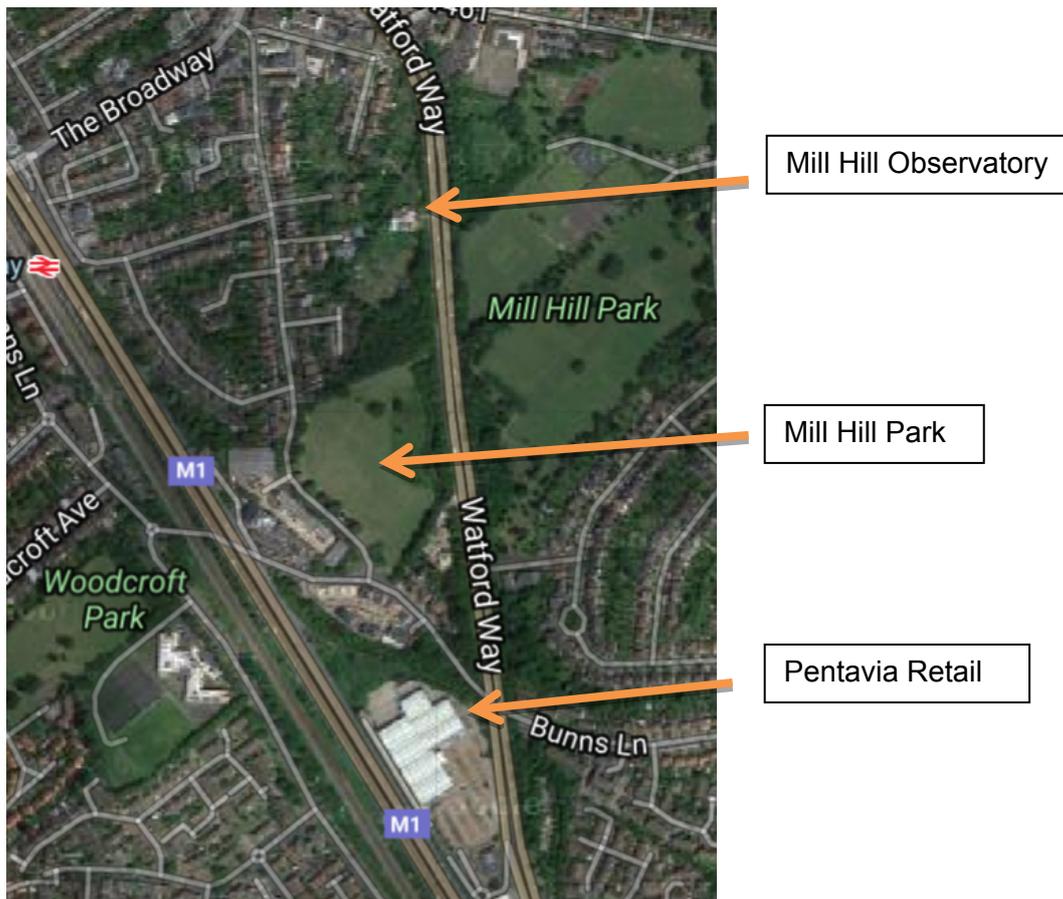


Figure 16: Location of Mill Hill Observatory

### Access and Connectivity

- 7.9 The current site has poor permeability and accessibility due to the boundary effects of surrounding major road transport infrastructure (M1 and A1 / A41), with a single left-in left-out access via the A1 / A41 Watford Way northbound carriageway, which is part of the Transport for London road network (TLRN).
- 7.10 Access to the site for traffic travelling southbound on the A1 / A41 requires vehicles to undertake a legal U-turn manoeuvre at Fiveways Corner; 1.8km south of the site whilst traffic egressing the site and heading south are required to use the roundabout at Mill Hill Circus to return in the opposite direction; 2.5km north of the site. In both directions the junctions can become heavily congested at peak times. Therefore the additional traffic movements from proposed new uses for the site need to be carefully considered as a constraint on the scale of the development.
- 7.11 Pedestrian access to the site is also constrained, only being possible from the east via the existing A1 / A41 footway and the west via a pedestrian bridge over the M1 and then a subway under the Midland Mainline. Facilities for cyclists are also limited,

although there is an off-road cycle route along the east side of the A1 / A41 which extends south to Hendon and on to Brent Cross (accessed from the site via a subway, so cyclists would be required to dismount). Grahame Park Way that runs parallel to the M1 is also signed for cyclists; this route can be accessed via the subway and footbridge, however cyclists are required to dismount as cycling is not permitted in the subway and on the footbridge.

- 7.12 The Pentavia site has a low PTAL rating of between 1a (very poor) and 3 (Moderate), with the majority of the location being 1b (very poor). The nearest railway station is Mill Hill Broadway which is 960m from the site and is served by Thameslink services. The typical daytime service from the station is four trains per hour to central London, Wimbledon and Sutton, of which two terminate at St Albans and two at Luton. The nearest underground stations are Colindale, Burnt Oak and Mill Hill East, all on the Northern line. Bus routes 113 and 221 provide reasonably frequent services as discussed earlier. However innovative solutions need to be found to provide better access to these and other bus routes; ensuring high quality sustainable transport connections, including continuous, safe and accessible pedestrian and cycle links are essential.
- 7.13 Improving linkages to existing and potentially new public transport services and facilities, as well as other key local centres and amenities, will be critical for the redevelopment of this site. In effect, direct and safe links that provide accessibility to all should be provided to adjacent bus stops, local primary / secondary schools, Mill Hill Broadway Town Centre, Mill Hill Broadway Station and one or both of the nearest Underground Stations. In addition to infrastructure measures it is envisaged that a range of sustainable transport proposals, including the introduction of car clubs and other travel plan incentives for the site, will need to be implemented.
- 7.14 The primary vehicular access to this site for entry is expected to continue to be via the A1 / A41 Watford Way. However, there is an opportunity to provide better pedestrian and cycle access to and from the site by creating a new link to Bunns Lane. Due to existing traffic congestion on Bunns Lane any new vehicular connection between the development and this road will need to demonstrate it can be safely accommodated and have nil detriment on the connections in both directions. Any proposed access will have to work with the level changes between Bunns Lane and the site and will need to be off an appropriate gradient.
- 7.15 Due consideration must be given to the acceptability of the topography of pedestrian footways and new roads to ensure they comply with gradient recommendations outlined in the Manual for Streets (2010), specifically paragraphs 5.2.5, 8.4.1 and 8.4.2; and Shaping Neighbourhoods Accessible London: Achieving an Inclusive Environment SPG October 2014, specifically appendix 7 page 121.
- 7.16 A full Transport Assessment (TA) will therefore be required to examine the impact of the proposed development and how such impacts will be mitigated. It will therefore

need to include a detailed assessment of any new link roads. The impact of the development on the local road network, as assessed in the TA, should include, and not be restricted to the following junctions:

- i. A41 / Page Street / Hall Lane / A1 / A41 Great North Way (Fiveways Corner);*
- ii. A1 / A41 / The Broadway (Mill Hill Circus);*
- iii. Bunns Lane / Grahame Park Way;*
- iv. Page Street / Pursley Road / Bunns Lane;*
- v. Both ends of Flower Lane; and*
- vi. Bunns Lane / Hale Lane / The Broadway.*

- 7.17 Any vehicular access onto Bunns Lane from the site will create a new connection between the A1 / A41 Watford Way northbound and Bunns Lane / Grahame Park Way. Therefore consideration as to the need for installation of robust entry and exit control measures should be given to discourage through movement. Full details of such control measures will be required to be considered as part of the planning application, and are expected to be conditioned under any planning consent.
- 7.18 The design of the proposals should take into account the Council's Draft Developer's Design Guide, and current applicable standards.
- 7.19 Residential parking provision must be in accordance with Local Plan policy DM17, and also take into account provision for disabled drivers and electric vehicle charging points as set out within the London Plan. Non – residential parking standards should also accord with the London Plan. Parking restrictions on the local streets adjacent to the site will require review, with changes likely to be required to existing CPZs and potentially the introduction of new controls. Cycle parking provision on site should also accord with the London Plan.
- 7.20 To minimise the impact of the development on the highway network, Travel Plans will be required for both residential and commercial elements of any development. These will contain associated required targets and monitoring, a Servicing and Delivery Strategy, as well as a Construction Transport Management Plan. Within the site a Car Parking Management Plan will be required to support the developer's proposals alongside an Access Management Plan. Together such plans and measures will require suitable monitoring as well as joined-up site leadership. This will be addressed through a Planning Agreement associated with any application.
- 7.21 The collection of refuse will be required to be in accordance with Council policies with refuse facilities to be located within 10m of the highway for collection.
- 7.22 It is likely that any approved application will require contributions to be made to improve local sustainable transport modes in order to help support any new residential community as well as the success of future business uses on site. The

developer will likely also need to fund offsite highway works that may be considered necessary to mitigate any detrimental impacts of the development.

## **8 Planning Application Requirements**

- 8.1 A full planning application will need to be submitted for the site. This will enable the Council to consider the detailed design issues alongside the general principles of redevelopment, as the two are inter-related.
- 8.2 The Council has a Validation Checklist, which sets out the national and local requirements for planning applications. The developer, through the pre-application process should engage with the Council's planning officers to agree the range of documents to be submitted and the scope and standard expected. This will help to ensure that there are no delays in the validation process, and that requests for additional information are minimised once the application has been received.
- 8.3 This Brief identifies a number of elements of any application (landscaping, refuse, parking, and details of any new road links) that should be considered in full within the application rather than being left to future consideration under a condition. Early discussion is welcomed on these issues.
- 8.4 Furthermore, it is recommended that early discussions with Council officers on the likely conditions should any application be approved. Where conditions require the submission and discharge of further documents, the scope of those documents should be agreed before they are submitted. This will also help with the smooth discharge of those conditions.
- 8.5 The Council's requirements for consultation on planning applications are set out in the Statement of Community Involvement as adopted in June 2015. The applicant will need to demonstrate that the proposal has undergone significant community engagement in order to consult with different groups including the Mill Hill Neighbourhood Forum within the local community. This will be detailed within the Community Involvement Statement as submitted with the application.

### **Energy and Carbon Reduction**

- 8.6 The London Plan Policy 5.2 Minimising Carbon Dioxide Emissions emphasises that development proposals should make a contribution to minimising carbon dioxide emissions in conjunction with the energy hierarchy. Within major developments this leads to zero carbon residential buildings from 2016 and zero carbon non-domestic buildings from 2019.
- 8.7 Development proposals should make the fullest contribution to minimising carbon dioxide emissions in accordance with the following energy hierarchy:
- Be lean: use less energy

- Be clean: supply energy efficiently
- Be green: use renewable energy

8.8 Development should demonstrate how its Lean, Clean and Green through submission of an Energy Statement.

8.9 The London Plan highlights that the move to zero carbon from major development should take account of the ease and practicability of connection to existing networks, context, size, nature, location, accessibility and expected operation.

### **Surface Water Management**

8.10 The development should not have a harmful impact on the water environment, water quality and drainage systems. There are no water features on site and the site does not fall within a flood zone. However, the site is expected to provide suitable mechanisms for managing surface water flows and runoff within the site to avoid and redirect run-off from the mains drainage system.

8.11 A site wide Surface Water Drainage Strategy is required and this would need approval from the Council in its capacity as Lead Local Flood Authority. New water features should be natural to improve biodiversity. Dependant on the findings of the Surface Water Management Report, the uses of Sustainable Urban Drainage Systems (SUDS) may be appropriate.

## 9 Development Contributions

### Community Infrastructure Levy

- 9.1 The purpose of CIL is to pay for infrastructure required to mitigate the impact of development across the Borough. Barnet's CIL charging rate has been set at: £135 per m<sup>2</sup> indexed linked. It applies to the 'net additional floorspace' of new development which is delivering 100 m<sup>2</sup> or more of gross internal floorspace or the creation of one additional dwelling. Provided such floorspace is demonstrated as meeting the relevant tests to show that it has been 'in use'.
- 9.2 In addition to Barnet's CIL the Mayoral CIL applies to all chargeable development in the borough this is currently a flat rate of £35 per m<sup>2</sup>, index-linked.

### S106 Requirements

- 9.3 The items sought through a planning obligation will vary depending on the development scheme and its location. Considerations that may be included in a Section 106 agreement are included below, the highlighted elements are those considered most likely to apply to a proposed scheme at this site:
- improvements to public transport infrastructure, systems and services
  - education provision
  - affordable or special needs housing
  - health facilities
  - small business accommodation and training programmes to promote local employment and economic prosperity
  - town centre regeneration and promotion
  - management and physical environmental improvements including heritage and conservation
  - improvements to highways and sustainable forms of transport
  - environmental improvements
  - provision of public open space and improving access to public open space including sport pitches
  - other community facilities including policing
  - other benefits sought as appropriate.
- 9.4 In accordance with Paragraph 204 of the NPPF and Community Infrastructure Levy Regulations 122, planning obligations should only be sought where they meet all of the following tests:

- necessary to make the development acceptable in planning terms;
- directly related to the development; and
- fairly and reasonably related in scale and kind to the development.

9.5 In considering planning obligations, we will take into account the range of benefits a development provides. It will also be important to ensure that the scale of obligations are carefully considered so they do not threaten the viability of development, in accordance with paragraph 173 of the NPPF.

9.6 The extent to which a development is publicly funded will also be taken into account and policy applied flexibly in such cases. Pooled contributions will be used when the combined impact of a number of schemes creates the need for infrastructure or works, although such pooling will only take place within the restrictions of the Community Infrastructure Levy Regulations 2010.

9.7 As per standard viability appraisal procedures, applications will need to be accompanied by a viability assessment which will be appraised by a Council appointed assessor to ensure the maximum reasonable amount of affordable housing is provided.

## Appendix 1 - Relevant National, Regional and Local Planning policies

### Key Policy Documents

National Planning Policy Framework

The London Plan 2015

LB Barnet Core Strategy

LB Barnet Development Management Policies

LB Sustainable Design and Construction SPD 2016

LB Residential Design Guidance 2016

### Policy Summary Index

Planning Issue	National Planning Policy Framework (NPPF)	London Plan Policy	Local Plan Policy
Accessibility	Protecting Sustainable Transport – paragraph 32	Policy 7.2: An inclusive environment	Policy DM 3: Accessibility and inclusive design
Employment	Delivering sustainable development - paragraph 22	Policy 4.1: Developing London's Economy  Policy 4.7: Retail and Town Centre Development  Policy 4.10: New and emerging	Policy DM14: New and existing employment space  Policy CS8: Promoting a strong and prosperous Barnet

		<p>economic sectors</p> <p>Policy 4.11: Encouraging a connected economy</p> <p>Policy 4.12: Improving opportunities for all</p>	
Housing Delivery	Delivering a wide choice of high quality homes – paragraph 50	<p>Policy 2.6:Outer London - Vision and strategy</p> <p>Policy 2.7:Outer London - economy</p> <p>Policy 2.8:Outer London - transport</p> <p>Policy 3.4:Optimising housing potential</p> <p>Policy 3.5: Quality and design of housing developments</p> <p>Policy 3.6 - Children and Young People’s Play and Infant Recreation Facilities</p> <p>Policy 3.8: Housing Choice</p> <p>Policy 3.12: Negotiating affordable housing on individual private residential and mixed use schemes</p>	<p>Policy CS4: Providing quality homes and housing choice in Barnet.</p> <p>Policy DM08: Ensuring a variety of sizes of new homes to meet housing need.</p>

Heritage and Landscape Character	Conserving and enhancing the historic environment – paragraph 126	<p>Policy 7.4: Local character</p> <p>Policy 7.8: Heritage assets and archaeology.</p>	<p>Policy CS5: Protecting and enhancing Barnet’s character to create high quality places</p> <p>Policy DM06: Barnet’s heritage and Conservation</p>
Health	Promoting healthy communities - paragraph 72	Policy 3.17: Health and social care facilities	Policy DM14: Community and education uses
Environment and Biodiversity	Conserving and enhancing the natural environment – paragraph 109	<p>Policy 2.18: Green Infrastructure – The multi-functional network of green and open spaces</p> <p>Policy 7.19: Biodiversity and access to nature</p> <p>Policy 7.21: Trees and woodlands</p> <p>Mayor’s London Tree and Woodland Framework</p> <p>TDAG’s Trees in the Townscape and the Woodland Trust’s Residential Development and Trees</p>	<p>Policy CS7: Enhancing and protecting Barnet’s open spaces</p> <p>Policy DM 15: Green Belt and open Spaces</p> <p>Policy DM 16: Biodiversity</p>

## Appendix 2 – Recent Relevant Planning History

Site Address: PENTAVIA RETAIL PARK Watford Way London NW7 2ET  
Application Number: 15/01825/FUL  
Application Type: Full  
Decision: Approved following legal agreement  
Decision Date: 05/08/2016  
Proposal: Demolition of the existing Class A3 unit (Restaurant) and partial demolition, recladding and extension of the existing Class A1 units (Retail) and creation of Class A3 (Restaurant & Cafe) floorspace, Class D2 (Gym) floorspace, reconfiguration of vehicular access, staff parking and customer parking. Associated hard and soft landscaping to public spaces and new ramped pedestrian access (SCHEME 2)

Site Address: PENTAVIA RETAIL PARK Watford Way London NW7 2ET  
Application Number: 15/01820/FUL  
Application Type: Full  
Decision: Approved following legal agreement  
Decision Date: 05/08/2016  
Proposal: Demolition of the existing Class A3 unit (Restaurant) and partial demolition, recladding and extension of the existing Class A1 units (Retail) and creation of Class A3 (Restaurant & Cafe) floorspace, Class D2 (Gym) floorspace, reconfiguration of vehicular access, staff parking and customer parking. Associated hard and soft landscaping to public spaces and new ramped pedestrian access

Site Address: PENTAVIA RETAIL PARK Watford Way London NW7 2ET  
Application Number: 14/08075/FUL  
Application Type: Full  
Decision: Approved following legal agreement  
Decision Date: 05/08/2016  
Proposal: Demolition of the existing Class A3 unit and partial demolition, recladding and extension of the existing Class A1 retail units and creation of Class A3 floorspace reconfiguration of vehicular access, staff parking and customer car parking. Associated hard and soft landscaping to public spaces, new ramped pedestrian access (amended description)

Site Address: PENTAVIA RETAIL PARK Watford Way London NW7 2ET  
Application Number: W00408BR/06  
Application Type: Section 192

Decision: Unlawful Development  
Decision Date: 04/06/2007  
Proposal: Use class A1.

Site Address: PENTAVIA RETAIL PARK Watford Way London NW7  
2ET

Application Number: W00408BQ/06  
Application Type: Section 192  
Decision: Unlawful Development  
Decision Date: 01/02/2008  
Appeal Decision: Allowed  
Appeal Decision Date: 01/02/2008  
Proposal: Use Class A1.

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**London Borough of Barnet**

Pentavia Planning Brief

Consultation Report

December 2016

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Other Issues

## **Summary of Consultation Activity**

Consultation of the draft Pentavia Planning Brief took place over a period of 6 weeks from 8<sup>th</sup> September until 20<sup>th</sup> October 2016. The consultation procedure included emails being sent to stakeholders on the Local Plan consultation database as well as letters posted to residents living in proximity of the Pentavia Retail Park. A Public Notice was published in the Barnet Press to publicise the public consultation and the draft Planning Brief was published on the Council's website. The public consultation event was a drop-in session at Hartley Hall on 5<sup>th</sup> October 2016. This was attended by representatives from the Planning Service who engaged with residents and answered questions. A comments board was set up to allow residents to express their views of the Brief. The consultation responses received during this event are detailed in Appendix A of this report.

There were 30 responses received through the postal/email consultation. They were received from statutory stakeholders including TfL, Historic England and Environment Agency together with the Mill Hill Neighbourhood Forum, Mill Hill Preservation Society, the landowner and local residents. Of these responses, 9 supported the comments made by the Mill Hill Neighbourhood Forum. These consultation responses are detailed in Appendix B of this report.

Below is a summary of the main issues raised, with a full set of comments, alongside the Council's response to each representation. Any actions to revise the Planning Brief in order to address responses are highlighted.

### **Main issues raised**

Impact on traffic

Pollution and noise

Affordable Housing

Impact on local services

Mass of the building and impact on character

Other appropriate uses

**APPENDIX A: RESPONSES FROM PUBLIC CONSULTATION EVENT**

<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
Access for emergency vehicles, A1 gridlock, impact on Bunns Lane	The Council will need to ensure that any proposal will have satisfactory and efficient means of access. This will be appraised at the application stage.	No change necessary.
Rivington Close – high impact	Rivington Close is to the west of the Pentavia site, in para 2.9 of the Brief which states that <i>‘the residential areas to the west of the site consist of two storey houses’</i> . Further consideration is given to the impacts on these residential units in the Constraints, Urban Form and Building Heights and Bulk sections of the Brief.	No change necessary.
How many cars will be on site – will this have a detrimental impact?	The Brief does not aim to not restrict development and therefore does not specify a maximum or minimum number of vehicles that will be on site as a result of the future redevelopment of the site. Para 7.18 specifies that residential parking provision must be in line with Local Plan policy DM17.	No change necessary.
Ground stability	The Environment Agency have identified that the site is located on a historic landfill site and appears to be subject to a past activity which poses a high risk of pollution to controlled waters. Issues relating to ground stability and contamination will be considered at the application stage and further investigation is therefore merited.	Add to end of para 4.11. <i>‘ The Environment Agency have identified that the site is located on a historic landfill site and appears to be subject to past activity which poses a high risk of pollution to controlled waters. Issues relating to ground stability and contamination will be considered at the application stage. Further investigation is therefore merited’</i> .
Former retail park not successful	The Planning Brief acknowledges that the existing retail park is <i>‘outmoded’</i> and its out of centre location is not supported by national policy .	No change necessary.
Tall buildings – visual impact	The role of the Planning Brief is to act as a guide for future developers. This includes setting out the site’s constraints and opportunities for development. As stated in para 6.14 of the Brief	In order to clarify the approach to building heights the following text will be added to para 6.14 <i>‘Any application will need to</i>

	<p><i>'Any development proposals for Pentavia should demonstrate successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors'. Para 7.7 goes on to state that application designs must not appear overbearing on Barnet's skyline nor to adjoining residential areas. It is considered that this is sufficient analysis of the building height issue in this Brief. Of course any application will need to provide visualisations of the proposed scheme to allow planning officers to assess the impact of the proposal on the skyline and local character, as well as overshadowing drawings to show the extent of overshadowing caused by a future development.</i></p>	<p><i>include view visualisations to show the impact of the proposal on the skyline and local character. These views should be agreed with the Council in advance of submitting the application. In addition, overshadowing drawings will also need to be provided to show the extent of overshadowing'.</i></p>
What does cycle link mean?	<p>Cycle links refer to new dedicated cycle lanes between the site and adjoining areas to allow cyclists to travel separated from vehicular traffic.</p>	<p>No change necessary.</p>
Impact on views from Grahame Park Way	<p>Applications will need to provide visualisations of the proposed scheme to allow planning officers to assess the impact of the proposal on the skyline and local character. Para 7.7 states that any designs must not appear overbearing either on Barnet's skyline or to adjoining residential areas.</p>	<p>The following text will be added to para 6.14 <i>'Any application will need to include view visualisations to show the impact of the proposal on the skyline and local character. These views should be agreed with the Council in advance of submitting the application. In addition, overshadowing drawings will also need to be provided to show the extent of overshadowing'.</i></p>
Pollution levels should be tested on site	<p>This is addressed in the Brief, para 4.11 states <i>'Detailed mapping of particulates across the site will be required due to its constrained nature between transport corridors. Furthermore, an on-site assessment will be required to identify if more permanent measuring systems and controls to limit health risks are required in order to ensure proposed uses support improvement of health and wellbeing as envisioned within the Council's Health and Wellbeing Strategy'.</i></p>	<p>No change necessary.</p>
Young people	<p>This Planning Brief is directly related to the Pentavia Retail Park site</p>	<p>No change necessary.</p>

accommodation in a better environment may be ok – students	and is assessing the types of uses that would be appropriate in this location.	
Less than 8 storeys	The role of the Planning Brief is to act as a guide for future developers as to the kind of development which is considered acceptable to the Council. This includes laying out the site constraints and outline opportunities for development. As stated in para 6.14 of the Brief <i>‘Any development proposals for Pentavia should demonstrate successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors’</i> . It is considered that this text provides sufficient analysis of the building height issue in this Brief. Of course any application will need to provide visualisations of the proposed scheme to allow planning officers to assess the impact of the proposal on the skyline and local character.	In order to clarify the approach to building heights the following text will be added to 6.14 <i>‘Any application will need to include view visualisations to show the impact of the proposal on the skyline and local character. These views should be agreed with the Council in advance of submitting the application. In addition, overshadowing drawings will also need to be provided to show the extent of overshadowing’</i> .
Relationship with Churchill Place	This is addressed in para 6.16 of the Brief which states that the proximity of the site to low rise residential areas of Bunns Lane entails that the height of any new build should not have a detrimental impact on these neighbouring properties in terms of overbearing and overshadowing.	No change necessary.
Cars	There will be changes in the patterns of vehicular movement resulting from the redevelopment of the site. This is addressed in para 7.15 of the Brief which highlights that a full Transport Assessment will be required to examine the impact of the proposed development and how such impacts will be mitigated. This will enable the Council to properly assess the impact of new vehicular movements.	No change necessary.
Levels	Paras 4.3-4.4 of the Brief address issues relating to level changes around the site. The Brief states that <i>‘These level changes may have an impact on any new development achievable within the site, which will need to be addressed with any redevelopment proposal especially in terms of privacy and overlooking.’</i>	No change necessary.

Community uses needed	The objectives for the Pentavia site as listed in para 1.2 include new and ancillary community space that serves the needs of Colindale and Mill Hill.	No change necessary.
Steep levels	This is acknowledged in para 5.8 of the Brief which states ' <i>There appears to be significant level changes between the site and Grahame Park Way. This requires further investigation. It is, however, anticipated that this area of low rise residential housing may be affected by any future development on the Pentavia site. Again careful consideration will need to be given to building height and mass as well as set back distances at this boundary</i> '.	No change necessary.
Loss of existing retail use	The retail park use of this site has been identified in the Brief as ' <i>outmoded</i> ' and such out of town retail parks are no longer supported by national and local planning policy due to the detrimental impact they can have on local town centres (see para 3.20 – 3.25). However, the Brief objectives do identify the need for non-destination retail on this site.	No change necessary.
Will access work with levels?	It is understood that this could be an issue for any application for this site. In response to this comment, additional text has been added to the Planning Brief.	Add to para 7.14 ' <i>Any proposed access will have to work with the level changes between Bunns Lane and the site and will need to be off an appropriate gradient.</i> '
3 or 4 storeys is high enough	The role of the Planning Brief is not to restrict development, but to act as a guide for future development. This includes laying out the site constraints and outline opportunities for development. As stated in para 6.14 of the Brief ' <i>Any development proposals for Pentavia should demonstrate successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors</i> '. Para 7.7 goes on to state that application designs must not appear overbearing on Barnet's skyline not to adjoining residential areas.	No change necessary.
Flats do not make for good communities	The Planning Brief does not specify that flatted development should happen on this site. Any proposal will need to demonstrate that it	No change necessary.

	provides the necessary facilities to allow for new communities to be created e.g. mix of uses, good accessibility and legibility, new public space.	
Ambulance and fire access	Any application will be expected to provide ambulance and fire engine access to the site. These accesses will be reviewed as part of the application appraisal process.	No change necessary.
No block type development	The role of the Brief is not to restrict development and para 7.6 states that as the site is separated from other adjoining residential areas by major transport infrastructure, there is the opportunity to construct a distinctive built form that utilises modern building techniques to mitigate constraints and deliver an efficient and flexible form of development of the site. Any future developments will be assessed in terms of its impact on the skyline and adjoining residential areas and conservation areas.	No change necessary.
Tall buildings	Building height will be a key consideration in appraising any applications as per para 7.7 which states that future designs must not appear overbearing on Barnet's skyline nor to adjoining residential areas.	No change necessary.
Site safety and security	Site safety is a key issue. In response to this comment text relating to this issue will be added to the Brief.	Addition to para 6.19 ' <i>Site safety is a key consideration and any future proposal should be designed in line with secured by design principles</i> '.
Over development	How development manifest itself and whether this constitutes overdevelopment will be considered at the application stage. However, key contributors to over development namely building heights, mass and density have been addressed in the Brief.	No change necessary.
Design and density are key issues	Para 6.15 of the Brief states ' <i>Density should have regard to Table 3.2 of the London Plan, which guides density in terms of the surrounding character of the area, and access to public transport</i> '. This is considered to represent sufficient consideration of this issue.	No change necessary.
Will an appropriate level of	Para 6.2 states that future applications will be supported on the basis	No change necessary.

affordable housing be provided	that they ' <i>contribute to the maximum reasonable amount of affordable housing in line with Local Plan and London Plan policies</i> '. This is considered to clearly outline the Council's approach to affordable housing.	
Facilities for teenagers needed in Mill Hill	The objectives for the Brief include community uses and new amenity space.	No change necessary.
New residential uses will have a positive impact on Mill Hill Broadway economy.	The Council agrees with this consultation response.	No change necessary.
Overcrowding in new flats	The planning system has little control over occupancy of new residential units. An appropriate dwelling mix will be required in accordance with local plan policy.	No change necessary.
Buses full 211/113, northern line capacity	Para 9.3 outlines 'that contributions may be sought for ' <i>improvements to public transport infrastructure, systems and services</i> '. The extent of these will be considered at the application stage.	No change necessary.
Need leisure facilities in Mill Hill i.e. cinema – mainly an evening and weekend impact	The Council's preferred approach is to support such uses in town centres where they contribute to vitality and viability.	No change necessary.

## **APPENDIX B: WRITTEN CONSULTATION RESPONSES**

### **Impact on traffic**

<b>Respondent</b>	<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
<b>Transport for London</b>	<b>Para 1.1</b> TfL supports the overall purpose of the Brief	The Council welcomes this support.	No change necessary.
<b>Transport for London</b>	<b>Para 1.2</b> TfL supports the proposal to improve pedestrian and cycle links.	The Council welcomes this support.	No change necessary.

<p><b>Transport for London</b></p>	<p><b>Para 1.3</b> TfL supports the idea of screening the site from the A1/A41, with the following caveats:</p> <ul style="list-style-type: none"> <li>- TfL would need to agree to any works adjacent or in close proximity to TfL highway structures</li> <li>- TfL provide bus services on the A1 (Route 113). The development should improve access to nearest bus stops and welcome any positive suggestion to improve the ambience of these stops.</li> </ul> <p>Also, any future applicant should also consider how they can improve legibility, safety and security along existing and new pedestrian and cycle links.</p>	<p>The Council welcomes this support and notes the caveats.</p>	<p>No change necessary.</p>
<p><b>Transport for London</b></p>	<p><b>Para 5.1</b> Whilst it is true that M1 and TLRN act as barriers to movement, they also connect the site to the rest of the road network and provide important public transport links.</p>	<p>The Brief has been revised to acknowledge that the restricted movement caused by surrounding major transport infrastructure relates mainly to pedestrian and cycle movement as opposed to vehicular movement.</p>	<p>Add to para 5.1 '<i>These strategic transport infrastructure barriers predominantly impact on pedestrian and cycle connections between the site and its surroundings</i>'.</p>
<p><b>Transport for London</b></p>	<p><b>Para 5.4</b> TfL agrees creating a pedestrian and cycle link to Bunns Lane is essential.</p>	<p>No response required.</p>	<p>No change necessary.</p>
<p><b>Transport for London</b></p>	<p><b>Para 5.9</b> The 113 runs from Edgware to Marble Arch only. The N113 runs from Edgware to Trafalgar Square.</p> <p>Intentions of this paragraph are agreed with by TfL.</p>	<p>Further clarification on bus services has been added to the Brief.</p>	<p>Change wording of para 5.9 to '<i>There is a bus stop directly outside the site on the A1 / A41 Watford Way which serves routes 113 and N113. Both these buses serve Mill</i></p>

			<i>Hill and Hendon on a route that runs from Edgware to Marble Arch on the 113 route and to Trafalgar Square on the N113 route at a frequency of every 6-11 minutes during peak times’.</i>
<b>Transport for London</b>	<p><b>Para 5.12</b></p> <p>TfL would note that if a new pedestrian link to Mill Hill Broadway station is provided that a PTAL of 3 could be achieved for the site or part of the site. The London Plan indicates that areas with PTAL between 0-1 are regarded as low accessibility when considering car dependency. The London Plan states the <i>“The Mayor wishes to see an appropriate balance being struck between promoting new development and preventing excessive car parking provision that can undermine cycling, walking and public transport use.”</i> TfL priority would be to promote cycling, walking and public transport access to this site and would provide the evidence. We note that 20% of households do not have access to a car in Mill Hill (only 29% of households use a car to get to work), and 40% of household in Colindale ward do not have a car, and only 19% use a car to get to work. The provision of a car club on site would help decouple car use from car ownership. Reference should be made to the following document <a href="https://www.london.gov.uk/sites/default/files/gla_migrate_files_destination/TfL%202012%20residential-parking-provision-new-development.pdf">https://www.london.gov.uk/sites/default/files/gla_migrate_files_destination/TfL%202012%20residential-parking-provision-new-development.pdf</a>.</p>	PTAL calculations; promotion of cycling, walking and public transport; use of census data and provision for a car club on site are all standard topics for the required Transport Assessment.	No change necessary.
<b>Transport for London</b>	<p><b>Para 5.13</b></p> <p>TfL supports this requirement. We note that basement parking, though desirable way to hide car parking, can represent poor</p>	This is noted by the Council. Parking will be assessed in accordance with Barnet’s parking policy (DM17).	No change necessary.

	quality environments, which impinge on the surface due to the design of access ramps and can limit the developers ability to develop public realm above them. To achieve good quality public realm on the surface requires good design and we suggest we overall car parking constraint.		
<b>Transport for London</b>	<b>Para 6.6</b> TfL agrees with this concern. It is important the site promotes public transport use, walking and cycling, also that all vehicles movements into and out of the site are managed appropriately, including management of servicing, deliveries and construction.	No Council response required.	No change necessary.
<b>Transport for London</b>	<b>Para 6.7</b> TfL would also note that active travel is important to good health. <a href="http://content.tfl.gov.uk/improving-the-health-of-londoners-transport-action-plan.pdf">http://content.tfl.gov.uk/improving-the-health-of-londoners-transport-action-plan.pdf</a> The site should promote active travel as this has a direct health benefit to residents and that leads to reduce car travel it can reduce pollution caused by cars.	No Council response required.	No change necessary.
<b>Transport for London</b>	<b>Para 6.7</b> Other transport measures that promote a good environment, are securing provision for Electric Vehicle Charging in accordance with London Plan standards, cycle parking in excess of the London Plan and managing delivery and servicing vehicles activity.	EVCP and cycle parking in accordance with the London Plan will be sought on the site as standard. A Delivery and Servicing Plan will be conditioned as part of any development.	No change necessary.
<b>Transport for London</b>	<b>Para 7.9</b> See comment under Para 5.1	Greater clarity is needed in the Brief to demonstrate that the restricted movement caused by surrounding major transport infrastructure relates mainly to pedestrian and cycle movement as opposed to vehicular movement.	Add to para 5.1 ' <i>The major transport infrastructure barriers particularly detrimentally affect pedestrian and cycle connections between the site and its surroundings</i> '.

<b>Transport for London</b>	<b>Para 7.14</b> TfL recommends that design of this access is provided in accord with highway authority's advice.	Agreed by the Council.	No change necessary.
<b>Transport for London</b>	<b>Para 7.15</b> The scope of junction assessments should be with the Council and TfL.	A Transport Assessment Scoping report will be required to be submitted as part of the EIA to both the Council Council and TfL. This will be required to include junctions for assessment which will have to be agreed by the Council.	No change necessary.
<b>Transport for London</b>	<b>Para 7.16</b> Transport Assessment should be prepared in accord with TfL Guidance.	This is agreed by the Council.	No change necessary.
<b>Transport for London</b>	<b>Para 7.18</b> Note earlier comments on parking constraint.	This is noted. The parking will be assessed in accordance with Barnet's parking policy (DM17).	No change necessary.
<b>Transport for London</b>	<b>Para 7.19</b> TfL agrees that the Travel Plan should be secured to be successful that needs to supported appropriate measures including offsite pedestrian and cycle measures, support for local bus services as well car parking restraint/ management.	Improvements to sustainable travel will be sought. Parking provision will be in accordance with Barnet's parking policy (DM17).	No change necessary.
<b>Transport for London</b>	<b>Para 8.9</b> Note the Mayor's <a href="https://consultations.tfl.gov.uk/environment/air-quality-consultation-phase-2/supporting_documents/Consultation%20and%20information%20document.pdf">https://consultations.tfl.gov.uk/environment/air-quality-consultation-phase-2/supporting_documents/Consultation%20and%20information%20document.pdf</a> focus on air quality and reference to London Plan Policy 7.14 and need to reduce emissions from transport as part of zero carbon development.	This is noted.	No change necessary.
<b>Transport for London</b>	TfL is the landowner of the site to the east of the A1, as shown in the attached plan. TfL Property is currently reviewing its entire portfolio of land across London and we have identified this site as	The Council looks forward to working with TfL Property in identifying development opportunities for their	No change necessary.

	<p>having the potential to come forward for operational and/or development opportunities within the next four years.</p> <p>TfL Property would therefore want to ensure the Planning Brief has regard to this neighbouring site and, ideally, explore with the Council the possibility of including the site within the boundary of the Planning Brief to allow for a more comprehensive redevelopment of the area, which may also aid in addressing some of the wider issues for the site.</p>	<p>portfolio in Barnet. This will be done through sites property in the Local Plan supported by Planning Briefs for individual sites.</p>	
<p><b>Transport for London</b></p>	<p>TfL support comments within the Draft Planning Brief relating to changes in site levels which acknowledge the potential for any development of the main Pentavia site to impact surrounding sites in terms of overshadowing, overbearing and privacy, as set out under paragraphs 4.4 and 6.16. No development of the main Pentavia site should limit or restrict the potential for the development of neighbouring sites.</p>  <p>The image is a site plan titled 'Mill Hill Slip Road Site Plan'. It features a blue circular logo with a white 'e' in the top left corner. The plan shows a street layout with a green shaded area and a blue shaded area. A north arrow is located in the top right, along with the following text: 'Date: 22/09/2016 10:56:46', 'User: rebecca.laden@tfl.gov.uk', and 'Scale: 1:1250 at A4'. At the bottom left, it says 'MAYOR OF LONDON' and at the bottom center, '© Crown copyright and database rights Ordnance Survey 100019313. Aerial data © GeoEye/GeoEye Ltd'.</p>	<p>It is not the intention of this Planning Brief to restrict opportunities for development at neighbouring sites.</p>	<p>No change necessary.</p>

<b>Highways England</b>	Highways England will be concerned with proposals that have the potential to impact on the safe and efficient operation of the Strategic Road Network (SRN), in this case the M1. Further to our telephone conversation and having examined the above document, we do not offer any comments. However Highways England would want to comment on any planning application that is received in the future.	Highways England will be consulted on planning applications with regard to this site.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 5.12</b> It is fundamental that any development fully accommodates all requirements for car parking within the site without allowing any overspill into already overcrowded roads that surround the site.	This is noted. Parking will be assessed in accordance with Barnet's parking policy (DM17), taking into account the proximity and any associated parking restrictions on adjacent streets.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.6</b> The Brief should also state that any development proposal for the site demonstrates how it will have no detrimental effect on the wider road and transport network.	Any development of the site will require a Transport Assessment to be submitted as part of the planning process. This requires the impact of the development on the wider road and transport network to be assessed.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.6</b> The is important given that, currently, there are almost daily "knock on effects" across the Mill Hill area, including, but not limited to, Mill Hill Broadway, Flower Lane, Graham Park Road and, further afield, the routes to both the A1 (Aerodrome road) and Colindale station/A5 (Colindale Road), Pursley Road and Devonshire road down to Holders Hill Circus, Hale Lane and Selvage lane up to Apex Corner.	Any development of the site will require a Transport Assessment to be submitted as part of the planning process. This requires the impact of the development of the wider road and transport network to be assessed.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.6</b> As background to the potential traffic problems the Brief should also note that Bunn's Lane is only passable currently because for	The existing operation of the adjacent highway network will form the basis of any submitted Transport	No change necessary.

	much of its length; from the M1 bridge to the Page street junction, vehicles park entirely on the pavement.	Assessment.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 7.14</b> The wording is welcomed in stating that any development should have “nil detriment” on connections in both directions. However we think the area and roads impacted should be extended as proposed earlier in this response.	Any development of the site will require a Transport Assessment to be submitted as part of the planning process. This requires the impact of the development of the wider road and transport network to be assessed.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 1.2</b> Transport links to Colindale cannot be improved and the pedestrian and cycle route seems to be the existing route reused. There may be some visual impact, but that is about all.	See proposed amendment.	Following amendment made to para 1.2: <i>‘and improvements to pedestrian and cycle links to.....’</i>
<b>Mill Hill Preservation Society</b>	<b>Para 5.4</b> MHPS are of the opinion that even with any improvement in the access to Bunns Lane, an already busy road, the development of the site would be limited by similar constraints to that of Churchill Place. However, Churchill Place is better located in relation to the open space of Mill Hill Park. This clause is misleading and needs to be revised.	Para 5.4 is considered to represent an accurate analysis of the site’s relationship with Bunns Lane and the potential to develop this linkage.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 5.7</b> The Society feels that this clause is unnecessary. It discusses items on the other side of the north/south transport corridor that are unrelated to the development of the Pentavia site and therefore is misleading. The clause needs to be omitted.	The close proximity of Grahame Park from the site warrants its mention in the Brief acceptable. Graham Park Way lies less than 100 metres from the boundary of Pentavia despite its physical separation by the M1 and railway line.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 5.12</b> We are pleased that the Brief confirms the low PTAL rating for the site. However MHPS believes it is fundamental that any development	Para 5.12 is clear on the application of parking standards within the site and 5.13 is clear on minimising	Para 5.12 to be amended to state <i>‘Due to the low PTAL</i>

	fully accommodates all requirements for car parking within the site without allowing any overspill into already overcrowded roads that surround the site. The Brief should confirm this.	parking within the site. Reference has been made to relevant policy DM17. The enhancement of pedestrian and cycle links and the provision of a range of uses on site discourage the use of vehicles. The potential for the implementation of a CPZ on neighbouring roads will be considered at the application stage.	<i>rating combined with difficult pedestrian and cycling linkages, plus the potential for parking overspill, any future development.....'</i>
<b>Mill Hill Preservation Society</b>	<b>Para 6.3</b> The Brief could make clearer the desire to provide substantially greater business use, given the proximity of the site to Central London and both the M1 and the A1, especially as we consider the site not really appropriate for residential use.	The Brief's objectives require the provision of employment floorspace as part of a mixed use scheme. It is considered that a range of uses would be appropriate for this site and would comply with planning policy.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 6.6</b> The Brief should state that the development proposal for the site will demonstrate how there will be no detrimental effect on the wider road and transport network. As background to the potential traffic problems the Brief should also note that Bunn's Lane is only passable currently because for much of its length, from the M1 bridge to the Page street junction, vehicles park entirely on the pavement. NB: We state this because there are almost daily "knock on effects" across the Mill Hill area, including, but not limited to, Mill Hill Broadway, Flower Lane, Graham Park Road and, further afield, the routes to both the A1 (Aerodrome Road) and Colindale station/A5 (Colindale Road), Pursley Road and Devonshire Road down to Holders Hill Circus, Hale Lane and Selvage Lane up to Apex Corner.	Para 7.15 outlines the role of the Transport Assessment in assessing the impact of developments on the local road network. Para 7.14 states that new vehicle connections should have nil detriment on connections in both directions.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 6.8</b> The Brief should require any development proposal to include this in a traffic management plan.	Queue times, impacts of local transport movements are key considerations in the Transport	No change necessary

		Assessment. Relevant conditions relating to this issue may also be required at the application stage.	
<b>Mill Hill Preservation Society</b>	<b>Para 7.10</b> The last sentence of this clause should be changed to read as follows: "Therefore the additional traffic movements from proposed new uses for the site need to be carefully considered and is (delete 'might become') a constraint on the scale of the development. Using the word 'might' in this sentence will make it meaningless.	The extent of the constraint caused by new uses is unknown. Therefore the use of 'might' is considered appropriate. This will be assessed at the application stage.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 7.16</b> MHPS do not agree that any vehicular access onto Bunns Lane from the site creating a connection between the A1/A41 Watford Way Northbound and Bunns Lane and Graham Park Way would be 'appealing'. Is this route a requirement of the design solution? We feel it is not and so the clause should be carefully rewritten to be more explicit.	The Council agrees that wording should be neutral on this connection.	Change para 7.16 by removing 'appealing'

### Pollution and noise

<b>Respondent</b>	<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 4.10</b> The Brief should take greater account of the impact of air pollution and acoustic impact that cannot simply be resolved by regular and permanent monitoring.	This is addressed in the Brief which highlights that any new development should incorporate modern building techniques to mitigate constraints (i.e. noise and air pollution) (see para 7.6). Para 6.20 and 6.21 requests that appropriate mitigation measures are installed as a matter of necessity, including consideration	No change necessary.

		of external mitigation measures and the design of the scheme to determine whether the built structures proposed can in fact provide sufficient screening to noise and air pollution.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.21</b> Within this context we think that “green buffers” would have negligible effect on air quality or on acoustic impact. The Brief should request that clear technical evidence is provided with any planning application on how measures will overcome the considerable environmental constraints of the site.	The Council’s Environmental Health Service considers that green buffers would have a positive impact on air quality. However, buffers would need to be of a suitable density, length and height to reduce noise inside the site.	Add to end of para 6.21 <i>‘Buffers would need to be of a suitable density, length and height to reduce noise inside the site to have an acoustic benefit’.</i>
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 7.8</b> The guidelines on light pollution are welcomed. We think the Brief should also mention the impact of light pollution on existing residents as well as the University of London Observatory.	The Planning Brief has been amended at para 6.22 to address the issue of light pollution.	Add to end of para 6.22 <i>‘Any proposed street lighting will require 0% light uplift. This will ensure that any future development will not result in sky glare’.</i>
<b>Sue Willetts</b>	One major issue is the pollution aspect from A41/M1/train – the noise/pollution levels would surely rule out any development here apart from retail	As part of preparing the Planning Brief, the Environmental Health Team was consulted regarding the suitability of residential uses on this site. After this team carried out on-site measurements, they considered that residential uses were appropriate on the condition that the appropriate mitigation measures be implemented as per para 6.20-6.22 of the Brief.	No change necessary.
<b>Deloitte on behalf of</b>	UCL are concerned that buildings up to 7 storeys along the northern edge of the site appear to be promoted	After consulting the Council’s Street Lighting department, the	Add to end of para 6.22 <i>‘Any proposed street lighting will require</i>

<b>University College London</b>	and seek assurance that the height and massing in this part of the site will be restricted to prevent any light pollution to the Observatory.	Planning Brief has been amended to address the issue of light pollution.	<i>0% light uplift. This will ensure that any future development will not result in sky glare'.</i>
<b>Resident</b>	The increase in the pollution to the area caused by increased traffic is a major concern. The ill health caused by increased exposure to pollution will put more strain on NHS.	This is a key consideration at the application stage. The Council will ensure that Public Health colleagues are consulted on applications at this location. Consideration will be given to the overall site sustainable travel plan compared to previous uses of the site to ensure that the application is air quality neutral.	No change necessary.
<b>Resident</b>	The location of the site makes it wholly unsuitable for housing in terms of noise and air pollution.	The Brief expects that any new development should incorporate modern building techniques to mitigate constraints (i.e. noise and air pollution) (see para 7.6). Para 6.20 and 6.21 requests that appropriate mitigation measures are installed as a matter of necessity, including consideration of external mitigation measures and the design of the scheme to determine whether the built structures proposed can in fact provide sufficient screening to noise and air pollution.	No change necessary.
<b>Resident</b>	Mill Hill Polluted already	This is a key consideration. The Council will ensure that Public Health colleagues are consulted on	No change necessary.

		applications at this location.	
<b>Resident</b>	A few trees are not going to be sufficient noise and air pollution (mitigation) measure(s) when the site is surrounded by the A1, A41 and a 4-track mainline railway.	As stated in the Planning Brief, mitigation measures will not just involve trees but instead a range of measures as per para 6.20-6.22 of the Brief.  Any mitigation measures implemented as part of an application will need to satisfy Environmental Health requirements to ensure that there are no detrimental impacts for future or existing residents.	No change necessary.
<b>Resident</b>	Poor decision for such a development there. Pollution.	This is a key consideration. The Council will ensure that Public Health colleagues are consulted on applications at this location.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 6.20 and 6.21</b> The sentence setting out mitigation measures needs to be changed to read... “residential units are not exposed to noise levels exceeding 55db nor poor air quality.” On the matter of ‘mitigation measures’ within this context we think that “green buffers” would have negligible effect on air quality or on acoustic impact. The Brief should request that clear technical evidence is provided with any planning application on how measures will overcome the considerable environmental constraints of the site.	The role of the Council’s Environmental Health Service in assessing mitigation measures is made clear in para 6.20. Environmental Health considers that green buffers would have a positive impact on air quality. However, buffers would need to be of a suitable density, length and height to reduce noise inside the site.	Add to end of para 6.21 <i>‘Buffers would need to be of a suitable density, length and height to reduce noise inside the site to have an acoustic benefit’.</i>
<b>Mill Hill Preservation Society</b>	<b>Para 7.8</b> The guidelines on light pollution are welcomed.	Noted.	No change necessary.

<b>Mill Hill Preservation Society</b>	<b>Section 4</b> The fact that the Brief states (Clause 4.10) that the national Air Quality Objectives for Nitrogen Dioxide and Particulate Matter (PM10) are exceeded reinforces our view that the site wedged between transport corridors is not appropriate for residential use and this fact should be emphasised in the Brief. Figure 12 -'Site constraints' (see Clause 4.12) does not indicate the full extent of the low-rise residential areas well enough. Nearly all the housing areas shown on this map are low-rise residential but they are not indicated as such. The figure needs redrafting.	Para 6.20 to 6.22 detail how noise and air pollution will need to be mitigated in order to provide a satisfactory living environment. Residential is therefore a use that can be considered at this location.  Figure 12 shows adjoining residential areas. This should be made more explicit in the Brief.	Change key description for Figure 12 to 'adjoining' residential areas.
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### Affordable Housing

Respondent	Response	Council Reply	Action
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 3.14</b> We believe that the Brief needs to be strengthened to make clear that Barnet Council expects that, if a residential development is submitted by any developer, it must comply with 40% provision of affordable housing target, split 60% social rent and 40% intermediate.	Para 3.14 states ' <i>Affordable Housing should be provided in line with the Council's strategic borough-wide target of 40% provision, subject to viability, for all new homes with a tenure mix of 60% social rented and 40% intermediate</i> '. As per standard appraisal procedures, applications will need to be	No change necessary.

		accompanied by a viability assessment which will be appraised by a Council appointed assessor to ensure the maximum reasonable amount of affordable housing is provided.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 3.14</b> Further we consider it important that this Brief, and future Briefs for other developments, should state that developers publically demonstrate they have made these assumptions when agreeing the purchase price for the land to be developed. Given the significant shortfall across Barnet and London more generally in the provision of affordable housing we think all parties need to demonstrate publically the desire to achieve these housing targets. Any sale of land for residential development should specifically acknowledge the need for “Affordable” housing and be priced to account for such.	This is a strategic issue that is beyond the remit of a Planning Brief. This is an issue which is likely to be addressed in the Mayor’s Draft Housing SPG by the end of 2016.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 3.14</b> We would expect to see specific evidence of real local need for the type of residential properties to be proposed by Meadow Partners in any application and not simply evidence to suggest that such need exists generally in London, but that it exists for people living in Mill Hill.	The London Plan encourages boroughs to have a more positive approach to the private rented sector supporting growth where this results in well managed, good quality accommodation, mixed and balanced communities and sustainable neighbourhoods. The Council cannot ignore the role that the Private Rented Sector has in meeting the diverse requirements of Barnet residents. Such	No change necessary.

		requirements were highlighted in the Housing Needs Assessment that supports the 2015 Housing Strategy.	
<b>Resident</b>	The wording with regard to affordable housing is not strict enough. There is a shortage of housing in the area, and without stricter wording this development risks being private rental properties. There should be a minimum level, below which the development will not go ahead.	Planning Briefs reflect existing policy frameworks i.e. the Local Plan and the London Plan in which the approach to securing affordable housing is set out. The London Plan encourages a more positive approach to the Private Rented Sector where this results in well managed, good quality accommodation, mixed and balanced communities and sustainable neighbourhoods.	No change necessary.
<b>Resident</b>	The lack of control over the amount of social housing and the risk that we will end up with yet more overpriced privately rented flats.	Para 3.14 states <i>'Affordable Housing should be provided in line with the Council's strategic borough-wide target of 40% provision, subject to viability, for all new homes with a tenure mix of 60% social rented and 40% intermediate'</i> .  In terms of private renting the London Plan encourages a more positive approach where this results in well managed, good quality accommodation, mixed and balanced communities and	No change necessary.

		sustainable neighbourhoods. The Council cannot ignore the role that the Private Rented Sector has in meeting the diverse requirements of Barnet residents	
<b>Mill Hill Preservation Society</b>	<p><b>Para 3.14 &amp; 3.15</b> The Mill Hill Preservation Society believes that the Brief needs to be strengthened to make clear that Barnet Council expects that, if a residential development is submitted by any developer, it must comply with 40% provision of affordable housing target, split 60% social rent and 40% intermediate.</p> <p>Further, we consider it important that this Brief, and future Briefs for other developments, should state that developers publicly demonstrate they have made these assumptions when agreeing the purchase price for the land to be developed. Given the significant shortfall across Barnet, and London more generally, in the provision of affordable housing we think all parties need to demonstrate publicly the desire to achieve these housing targets. Any sale of land for residential development should specifically acknowledge the need for “Affordable” housing and be priced to account for such.</p>	<p>These paragraphs outline the policy in regard to affordable housing requirements.</p> <p>Para 3.14 states ‘<i>Affordable Housing should be provided in line with the Council’s strategic borough-wide target of 40% provision, subject to viability, for all new homes with a tenure mix of 60% social rented and 40% intermediate</i>’. As per standard appraisal procedures, applications will need to be accompanied by a viability assessment which will be appraised by a Council appointed assessor to ensure the maximum reasonable amount of affordable housing is provided. In terms of managing the sale of land this is a strategic issue that is beyond the remit of a Planning Brief. This is an issue which is likely to be addressed in the Mayor’s Draft Housing SPG due out by the end of 2016.</p>	<p>Add the following text to end of 9.6 ‘<i>As per standard viability appraisal procedures, applications will need to be accompanied by a viability assessment which will be appraised by a Council appointed assessor to ensure the maximum reasonable amount of affordable housing is provided</i>’.</p>

**Impact on local services**

<b>Respondent</b>	<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
<b>Resident</b>	Current public facilities (such as doctor surgeries) are already full to breaking point.	<p>In compliance with the Planning Obligations SPD (2013) appropriate contributions will be sought through CIL to fund various infrastructure projects including roads, schools, health and social care, parks and leisure centres.</p> <p>Appropriate S106 contributions will also be sought to mitigate the impact of the development.</p> <p>The role of CIL and S106 in providing development contributions at this site is outlined on pages 32 and 33 of the Planning Brief.</p>	No change necessary.
<b>Resident</b>	I am concerned about the impact another residential development will have on the Mill Hill area. Where is the provision for new GP surgery places, primary school places, secondary school places.	<p>In compliance with the Planning Obligations SPD (2013) appropriate contributions will be sought through CIL to fund various infrastructure projects including roads, schools, health and social care, parks and leisure centres.</p> <p>Appropriate S106 contributions will also be sought to mitigate the impact of the development.</p> <p>The role of CIL and S106 in providing</p>	No change necessary.

		development contributions at this site is outlined on pages 32 and 33 of the Planning Brief.	
<b>Resident</b>	I urge the council to ensure that adequate measures are in place to deal with the increased passenger numbers on the Thameslink rail services at Mill Hill Broadway Railway Station. It is common knowledge that the Thameslink line is very unreliable and the trains are already crowded at peak times. The poor design of the station also lends itself to severe passenger congestion at the entrances and exists.	The requirement for contributions in regard to rail station upgrades is dependent on TfL appraisals of the impact of development. In the event that their response requests contributions for station improvements, this will be requested through S106.	No change necessary.
<b>Resident</b>	People cannot board a train now in the rush hour(s) sometimes and trains are cancelled causing more problems for the next train to arrive. How would a few hundred more people fit on a train?	The requirement for contributions in regard to rail station upgrades is dependent on TfL appraisals of the impact of development. In the event that their response requests contributions for station improvements, this will be requested through S106.	No change necessary.
<b>Resident</b>	It would be a concern for the station (which has incompetent systems at best) and the local services like doctors and schools.	In compliance with the Planning Obligations SPD (2013) appropriate contributions will be sought through CIL to fund various infrastructure projects including roads, schools, health and social care, parks and leisure centres.  Appropriate S106 contributions will also be sought to mitigate the impact of the development.	No change necessary.

		The role of CIL and S106 in providing development contributions at this site is outlined on pages 32 and 33 of the Planning Brief.	
<b>Resident</b>	I am concerned about the impact another residential development will have on the Mill Hill area. Where is the provision for new GP surgery places, primary school places, secondary school places. Bunns Lane is barely coping with rush hour traffic as it is, it is often at a standstill causing long delays. Mill Hill Thames Link is not going to be able to accommodate another 50 -100 commuters.	<p>In compliance with the Planning Obligations SPD (2013) appropriate contributions will be sought through CIL to fund various infrastructure projects including roads, schools, health and social care, parks and leisure centres.</p> <p>Appropriate S106 contributions will also be sought to mitigate the impact of the development.</p> <p>The role of CIL and S106 in providing development contributions at this site is outlined on pages 32 and 33 of the Planning Brief.</p>	No change necessary.

### Mass/height and design of the new buildings

<b>Respondent</b>	<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 3.16</b> We believe the Brief should state that any proposed residential development must meet, as a minimum the space and design standards laid out in the London Plan. Design standards should include, for any proposed residential unit, the means of escape with domestic sprinklers or include suitable fire engineering	As part of the appraisal process, any application will be assessed by the London Fire Brigade and will have to ensure it meets their safety standards. Any application will be assessed against standards set out in the recently adopted SPDs on	Add to para 6.19 <i>'The safety of future residents is of key importance. Therefore, future development proposals should contribute to the minimisation of potential physical risks, specifically fire. Appropriate mitigation</i>

	if any proposed residential unit is of “continental style” with bedrooms off open plan living rooms/kitchens.	Residential Sustainable Design and Construction.	<i>measures will need to be implemented including means of escape, domestic sprinklers or suitable fire engineering in line with London Plan policy 7.13. In the event that an application is submitted the London Fire Brigade will be consulted as part of the appraisal process.’</i>
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 3.19</b> We think the Brief should be more explicit that this site falls outside the strategic locations for tall buildings identified in the local plan. It should also reference the Colindale AAP in the section on the planning context that notes the M1 forms the eastern boundary. This adjacent area indicates buildings of around 1-2 stories as appropriate rather than anything higher.	Pentavia is not a strategic location for tall buildings. No new tall buildings have been approved outside of the strategic locations highlighted in the Local Plan policy CS5 since adoption in September 2012. The Colindale AAP is only applicable to the regeneration area and therefore cannot be reference in the context of Pentavia.  We have added a reference to the specific Local Plan policy on Tall Buildings.	Para 3.19 includes the following text: <i>‘Policy DM05: Tall buildings States that all buildings outside the strategic locations identified in the Core Strategy will not be considered acceptable. Proposals for tall buildings will need to demonstrate:</i> <i>i. an active street frontage where appropriate</i> <i>ii. successful integration into the existing urban fabric</i> <i>iii. a regard to topography and no adverse impact on Local Viewing Corridors, local views and the skyline</i> <i>iv. not cause harm to heritage assets and their setting</i> <i>v. that the potential microclimatic effect does not adversely affect’</i>
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.2</b> The Brief should make clear this is a suburban area and therefore, if a residential development is built, densities should be used consistent with the SQR matrix of a suburban area with a PTAL rating across	Par 6.15 states <i>‘Density should have regard to Table 3.2 – the Sustainable Residential Quality density matrix of the London Plan, which guides density in terms of</i>	Revise para 6.15 and add full title of London Plan Table 3.2.

	the majority of the site of 1b. Ideally the Brief should include the matrix in the body of the report.	<i>the surrounding character of the area, and access to public transport.</i> This extracts refers to the matrix stated in this consultation response.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.13</b> We believe this paragraph should omit the statement that 'tall buildings of 8 storeys or more in height will not be supported' as this suggests that buildings of 7 storey's may be acceptable. The last sentence therefore should be omitted from the Planning Brief.	The role of the Planning Brief is not to restrict development, but to act as a guide for future development. This includes laying out the site constraints and outline opportunities for development. As stated in para 6.14 of the Brief 'Any development proposals for Pentavia should demonstrate successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors'. Applications will need to provide visualisations of the proposed scheme to allow planning officers to assess the impact of the proposal on the skyline and local character.	In order to give further detail in regards to the assessment of the building heights the following text will be added to 6.14 ' <i>Any application will need to include view visualisations to show the impact of the proposal on the skyline and local character. These views should be agreed with the Council in advance of submitting the application</i> '.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.13</b> The Brief should be strengthened by making clear the impact of building heights on the site should be measured from the lowest level in the immediate vicinity of the development, not the height from the surface of the current car park in the retail park. Given the recent building of Churchill Place, which will be majorly impacted by any proposed development,	Para 4.3-4.4 outline that level changes are a key constraint to development. These paragraphs particularly note the significant level change between the site and Churchill Place and Grahame Park Way. The Brief goes on to state ' <i>These level changes may have an</i>	No change necessary.

	we think the Brief should make clear that any proposals should be consistent with the planning decisions and restrictions that were placed on this site.	<i>impact on any new development achievable within the site, which will need to be addressed with any redevelopment proposal especially in terms of privacy and overlooking’.</i>	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.13</b> We note that an earlier application for the Churchill Place site (H/01249/10) was refused. We think decisions about Pentavia Park should also be consistent with this decision	It should be noted that the Churchill Place site, although close to the Pentavia site, has a different building and character context as it fronts onto a residential road and is not separated from its built surroundings by major transport infrastructure. It is considered that the relevance of this application refusal is not a consideration.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.13</b> The Mill Hill Neighbourhood Forum note the height and density ranges applied in the Grahame Park Supplementary Planning Guidance, as recently as May 2016. In particular the height and density ranges for the “northern character area” quoted on page 38, limit height to, typically, 2-4 stories and density to 50-100 units per hectare. As the northern character area is the closest part of Grahame Park to Pentavia Park we believe any development on the latter site should be consistent with, and certainly limited to, the ranges used for the former site. Indeed Pentavia Park sits higher topographically and hence has the potential to be more overbearing.	The siting of Grahame Park and its relationship to surrounding residential areas is very different to that of Pentavia Retail park. Specifically, although Pentavia Retail Park is topographically higher than Grahame Park, it is surrounded by major transport infrastructure and therefore is spatially separated from nearby residential areas. Although these adjoining residential areas will be a key consideration in terms of impact (including loss of light and privacy), its physical separation	No change necessary.

		allows a different approach in terms of design and height.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 7.7</b> The words should be rewritten so as not to imply that blocks of 4 to 7 stories could be acceptable.	The role of the Planning Brief is not to restrict development, but to act as a guide for future development. For this reason the Planning Brief has not given an exact storey height to which proposals will need to comply. However, any future application will be assessed against the constraints outlined in the Brief including level changes and impact on local built character.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 7.7</b> It should also state that blocks of any height would be very visible, rather than quite visible.	The visibility of any future development is dependent on the height and design of the proposed buildings. At the Planning Brief stage it is not possible to fully clarify the extent of visibility.	Wording to be amended to <i>'prominent'</i> on para 7.7
<b>Resident</b>	Any buildings constructed on the Pentavia Retail Park site need to be in keeping with the character of the rest of Mill Hill in terms of height and density. New buildings should, therefore, in our view, be no taller than 4 storeys high. No mention is made of areas adjacent to Hillside Grove, the southern edge of Parkside and the southern corners of Mill Hill Park.	Para 7.6 of the Planning Brief notes that as the site is separated from other adjoining residential areas by major transport infrastructure and therefore has the opportunity to construct a distinctive built form that utilises modern building techniques.  However, para 6.14 of the Planning Brief also states that any development proposals for	No change necessary.

		<p>Pentavia should demonstrate successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors identified in Map 8 of the Local Plan Core Strategy, local views and the skyline.</p> <p>Although the Planning Brief doesn't explicitly make reference to the areas mentioned by this respondent, the para 7.7 of the Brief does states that the design must not have an overbearing impact on adjoining residential areas. This paragraph also state as the Pentavia site is elevated above the surrounding area, it is visible from a number of locations including a number of parks and recreation areas. This will include Mill Hill Park.</p>	
<b>Resident</b>	The wording around the height of the buildings will encourage designs of 4-7 storeys. This is too high for the area and is out of character of Mill Hill.	The role of the Planning Brief is not to restrict development, but to act as a guide for future development. This includes laying out the site constraints and outline opportunities for development. As stated in para 6.14 of the Brief <i>'Any development proposals for Pentavia should demonstrate</i>	Add to 6.14 <i>'Any application will need to include view visualisations to show the impact of the proposal on the skyline and local character. These views should be agreed with the Local Authority in advance of submitting the application'.</i>

		<i>successful integration into the existing urban fabric and have regard to topography and no adverse impact on Local Viewing Corridors’.</i>	
<b>Mill Hill Preservation Society</b>	<p><b>Para 3.19</b> MHPS believe the Brief should state more explicitly that this site falls outside the strategic locations for tall buildings identified in the local plan. It should also reference the Colindale AAP in the section on the planning context that notes the M1 forms the eastern boundary to that development. This adjacent area indicates buildings of around 1-2 stories as appropriate rather than anything higher especially as the site is already elevated in relation to any nearby residential development.</p>	<p>Pentavia is not a strategic location for tall buildings. No new tall buildings have been approved outside of the strategic locations highlighted in the Local Plan policy CS5 since adoption in September 2012. The Colindale AAP is only applicable to the regeneration area and therefore cannot be reference in the context of Pentavia.</p> <p>We have added a reference to the specific Local Plan policy on Tall Buildings.</p>	<p>Para 3.19 includes the following text: <i>Policy DM05: Tall buildings States that all buildings outside the strategic locations identified in the Core Strategy will not be considered acceptable. Proposals for tall buildings will need to demonstrate:</i></p> <ul style="list-style-type: none"> <li><i>i. an active street frontage where appropriate</i></li> <li><i>ii. successful integration into the existing urban fabric</i></li> <li><i>iii. a regard to topography and no adverse impact on Local Viewing Corridors, local views and the skyline</i></li> <li><i>iv. not cause harm to heritage assets and their setting</i></li> <li><i>v. that the potential microclimatic effect does not adversely affect existing levels of comfort in the public realm.</i></li> </ul>
<b>Mill Hill Preservation Society</b>	<p><b>Section 4</b> Constraints: Generally, the constraints section could be better worded. This section needs to include building density and provide a clear description of the surrounding suburban housing of 1-2 -3 story properties.</p>	<p>The Council agrees with this response. This adds to paras 6.12-6.19 highlight views from a range of locations including the Watling Estate.</p>	<p>Add to para 4.3 <i>‘These drawings should include cross sections showing the relationship between proposed developments and adjoining built environments’.</i></p>

	<p>It should also highlight the need to consider any potential visual impact on Bunns Lane and Mill Hill Park, along with other residential areas and viewpoints from higher ground within the Mill Hill Conservation area (noted in Clause 4.5). The Brief should request that various cross sections be provided that are drawn to include adjacent areas of housing, with transport corridors, and not simply through the site (Clause 4.3).</p>		
<p><b>Mill Hill Preservation Society</b></p>	<p><b>Para 6.2</b>  The Brief should make clear this is a suburban area and therefore, if a residential development is proposed, densities should be used consistent with the London Plan, Policy 3.4 - Table 3.2 'Sustainable residential quality (SRQ) density matrix (habitable rooms and dwellings per hectare)' for a suburban location with a PTAL rating across the majority of the site of 1b. Ideally, for the sake of clarity, the Brief should include the relevant part of the matrix in the body of the report. We doubt that residential uses are "appropriate for the site" as stated in this clause. Further, MHPS feel that the sentence... "The Council recognises that as housing need increases new innovative and non-conventional housing products will come forward" be omitted from the Brief as this presumes the outcome will be a residential development.</p>	<p>Notes to Table 3.2 of the London Plan define urban and suburban settings. It is considered that the Pentavia Retail Park lies in an urban setting as surrounding built character consists of predominantly terraced housing with some blocks of flats to the east, mansion style blocks to the North and East within Churchill Place and off Bunns Lane and a large block building accommodating a car showroom which is effectively 4 storeys in height. There is also a mix of uses in the immediate area including nursery, car showroom, petrol station, school and a college. The nearby major transport infrastructure is not characteristic of a suburban site. The site as currently presented with large building footprints and areas of hard surfacing and lack of</p>	<p>No change necessary.</p>

		<p>residential uses is not suburban in character.</p> <p>The objectives for the Brief are very clear that residential can be provided as part of a mixed use development.</p>	
<b>Mill Hill Preservation Society</b>	<p><b>Urban Form and Character: sub –heading</b></p> <p>The subtitle in the draft Brief after Para 6.11 should use the word “<i>suburban</i>” rather than the word “urban”. This reflects better both the nature of the broader area in which any development needs to sit, along with the more specific guidelines about density and mass of any proposed buildings.</p>	<p>It is considered that the Pentavia Retail Park lies in an urban setting as surrounding built character consists of predominantly terraced housing with some blocks of flats to the east, mansion style blocks to the North and East within Churchill Place and off Bunns Lane and a large block building accommodating a car showroom which is effectively 4 storeys in height. There is also a mix of uses in the immediate area including nursery, car showroom, petrol station, school and a college. The nearby major transport infrastructure is not characteristic of a suburban site. The site as currently presented with large building footprints and areas of hard surfacing and lack of residential uses is not suburban in character.</p>	No change necessary.
<b>Mill Hill</b>	<b>Clause 6.13</b>	The role of the Planning Brief is not	Add the following text to para 7.1

<p><b>Preservation Society</b></p>	<p>We believe this paragraph should omit the statement that ‘tall buildings of 8 storeys or more in height will not be supported’ as this suggests that buildings of 7 storeys may be acceptable. The last sentence therefore should be omitted from the Planning Brief. The Mill Hill Neighbourhood Forum make other points about this clause which we agree with and restate below:</p> <ul style="list-style-type: none"> <li>• The Brief should be strengthened by making clear the impact of building heights on the site should be measured from the lowest level in the immediate vicinity of the development, not the height from the surface of the current car park in the retail park.</li> <li>• Given the recent building of Churchill Place, which will be majorly impacted by any proposed development, we think the Brief should make clear that any proposals should be consistent with the planning decisions and restrictions that were placed on this site.</li> <li>• We note that an earlier application for the Churchill Place site (H/01249/10) was refused. We think decisions about Pentavia Park should also be consistent with this decision.</li> <li>• We also note the height and density ranges applied in the Grahame Park Supplementary Planning Guidance, as recently as May 2016. In particular the height and density ranges for the “northern character area” quoted on page 38, limit height to, typically, 2-4 stories and density to 50-100 units per hectare. As the northern character area is the closest part of Grahame Park to Pentavia Park we believe any development on the latter site should be consistent with, and certainly limited to, the ranges used for the former site. Indeed Pentavia Park sits higher topographically and hence has the potential to be more</li> </ul>	<p>to restrict development, but to act as a guide for future development. For this reason the Planning Brief has not given an exact storey height to which proposals will need to comply. However, any future application will be assessed against the constraints outlined in the Brief including level changes and impact on local built character.</p> <p>Notes to Table 3.2 of the London Plan define urban and suburban settings. It is considered that the Pentavia Retail Park lies in an urban setting as surrounding built character consists of predominantly terraced housing with some blocks of flats to the east, mansion style blocks to the North and East within Churchill Place and off Bunns Lane and a large block building accommodating a car showroom which is effectively 4 storeys in height. There is also a mix of uses in the immediate area including nursery, car showroom, petrol station, school and a college. The nearby major transport infrastructure is not characteristic of a suburban site. The site as</p>	<p><i>‘Cross section drawings should be submitted as part of any future application showing the relationship with the new development and adjoining roads and housing’.</i> This will allow accurate assessments of the impact of the development on adjoining residential areas including Churchill Place.</p>
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	overbearing.	<p>currently presented with large building footprints and areas of hard surfacing and lack of residential uses is not suburban in character.</p> <p>Churchill Place and Grahame Park, although close to the site, have a different built environment context and surrounding urban grain. Therefore, references to storey height, densities and recent planning refusals are not considered relevant to the Pentavia site.</p>	
<b>Mill Hill Preservation Society</b>	<p><b>Para 6.14</b> The Society does not consider that reference to Local Viewing Corridors identified in Map 8 of the Local Plan Core Strategy is appropriate. This map is far too general to deal with the potential impact of buildings of any bulk on the skyline in the immediate neighbourhood of Mill Hill. This clause needs to be redrafted to include the impact on local views as well as the macro situation.</p>	<p>Para 4.5 refers to a range of views in addition to Local Viewing Corridors including Mill Field and St Joseph’s Missionary College.</p>	<p>Replace ‘dominant’ with ‘predominant’.</p>
<b>Mill Hill Preservation Society</b>	<p><b>Para 6.18</b> We do not understand why this clause has been included. All elevations are visible therefore the clause is meaningless. We suggest it is omitted. It also smacks of a get ‘out of jail free card’ if the developer does propose high buildings that are not appropriate to the site.</p>	<p>The extent of the visibility of elevations is expected to vary. Some internal elevations may not be visible from outside the site. The quality of appearance of elevations will not overcome any detrimental impacts of overshadowing, over-bearing</p>	<p>Addition to para 6.18: <i>‘It should however be noted that the quality of appearance of elevations will not overcome any detrimental impacts of overshadowing, over-bearing appearance of negative impact on skyline’.</i></p>

		appearance of negative impact on skyline.	
<b>Mill Hill Preservation Society</b>	<b>Para 6.19</b> The Brief should be more explicit about what it means by <i>'some roofline interest might frame the sky exposure of views from adjacent areas and make any structures less overbearing.'</i> If buildings proposed are of a height to suit the surrounding residential uses they should not be overbearing. MHPS would prefer the Brief to be more specific on what constraints any development should follow.	The role of the Planning Brief to act as a guide for future developers. The Brief has therefore not been more explicit on this issue. This will be a key consideration in the event of an application.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 7.7</b> The words should be rewritten so as not to imply that blocks of 4 to 7 stories could be acceptable. It should also state that blocks of any height would be very visible, rather than quite visible.	The visibility of any future development is dependent on the height and design of the proposed buildings. At the Planning Brief stage it is not possible to fully clarify the extent of visibility.	Wording to be amended to 'prominent' on para 7.7

**Other uses would be more appropriate**

<b>Respondent</b>	<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 3.22</b> More fundamentally, we do not believe that the case for changing the use of the site from A1/A3 to mixed use has been definitively made.  We think the Brief should presume a continuation of the existing type of use. Pentavia Park, as a retail site, was successful for almost 25 years. Meadow Partners first proposed a new and improved retail/leisure offering and Barnet Council approved this application.	Ensuring the efficient use of brownfield land is an overwhelming national policy priority. The existing out of town centre retail park is not considered efficient or sustainable reflecting changing trends in retail and the need for new homes as well as new business space in Barnet and London.	No change necessary.

<p><b>Mill Hill Preservation Society</b></p>	<p><b>Para 3.22</b> Meadows Partners has not justified, except by implication in narrow short term financial terms, the reason to build substantial residential units on the site.</p>	<p>The Brief is clear that new residential uses will be part of a mixed use development in order to achieve such balance advocated by the Mill Hill Preservation Society.</p> <p>Given the demands for delivering new homes in London, changing retail trends in terms of the higher use of internet shopping and national policy supporting town centre first, we would not normally expect landowners to justify loss of retail in an out of town location. The need for residential is supported by the Council and this Brief has been produced to set the parameters for a development that will reunite the site with the Mill Hill area.</p> <p>We recognise the importance of consumer choice in our Local Plan while emphasising the need to attract inward investment to out of town centres. However, shopping habits are changing with the rise of internet retail and the growth of click and collect premises in town centre locations.</p>	<p>No change necessary.</p>
<p><b>Mill Hill Neighbourhood Forum</b></p>	<p><b>Para 3.22</b> Whilst the need for additional housing across London is unarguable, so is the need for areas to have a</p>	<p>Core principles of the NPPF encourage the effective use of land by reusing land that has been</p>	<p>No change necessary.</p>

	<p>balanced set of developments with appropriate amount of residential builds along with community infrastructure (schools, medical facilities etc), transport infrastructure that can support the number of residents and retail/commercial infrastructure that fosters a vibrant local economy. We think the Brief should put greater emphasis on the potential of this site to provide all types of non-residential infrastructure.</p>	<p>previously developed (brownfield land), provided that it is not of high environmental value. The NPPF promotes mixed use developments, and encourage multiple benefits from the use of land in urban and rural areas. A mixed use scheme at Pentavia can deliver more benefits than a single use scheme be it retail or residential'</p> <p>Retention of the existing use is a decision for the landowners and this is acknowledged in para 2.1</p>	
<p><b>Mill Hill Neighbourhood Forum</b></p>	<p>Para 3.22 The “town centre first” policy does not mean that Mill Hill Broadway could accommodate larger retail units of the type historically on the Pentavia site. Indeed the Pentavia site was seen by many residents as complementary to the small scale shops of the Broadway. With the closure of the current retail facility on Pentavia park Mill Hill residents must drive further (Borehamwood for instance – thus damaging Barnet’s economy) in order to use facilities that could be accommodated on Pentavia.</p>	<p>We recognise the importance of consumer choice in our Local Plan while emphasising the need to attract inward investment to out of town centres. However, shopping habits are changing with the rise of internal retail and the growth of click and collect premises in town centre locations.</p>	<p>No change necessary.</p>
<p><b>Mill Hill Neighbourhood Forum</b></p>	<p><b>Para 6.8</b> It is noted that the provision of residential development is phrased as a question. We think the</p>	<p>The objectives for the Planning Brief request a range of uses. It is likely that any future scheme will</p>	<p>No change necessary.</p>

	rest of the Brief should follow the same approach and not assume or imply that the site will be a substantially residential development.	include a significant proportion of residential uses. However, in order to comply with the objectives of the Brief any future development will also need to provide other uses including retail, employment and community. This is to strengthen the future communities on this site, revitalise this location and create a strong sense of place.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.8</b> The availability of any onsite community and retail uses will be used by Mill Hill residents' generally and not just residents of any proposed residential development. The Brief should require any development proposal to include this in a traffic management plan.	All new vehicle movements will be required to be accounted for in the Transport Assessment.	No change necessary.
<b>Resident</b>	The Pentavia Retail Park site to be ideally placed to meet the growing demand for retail, leisure and office facilities that has resulted from the continued expansion of Colindale, Mill Hill and the surrounding areas. Would suggest wording of Brief changed to support the development of the Pentavia Retail Park as an out of centre location for retail, leisure and office use. The lack of any alternative, apart from Mill Hill Broadway, which has only limited scope for expansion, makes this an attractive option.	As described in para 11.2.3 of the Core Strategy ' <i>National guidance defines the main town centre uses. This definition includes retail development leisure, entertainment facilities such as cinemas, restaurants, pubs, offices and theatres, museums and hotels</i> '. As leisure is included in this list of town centre uses, this site's out of town centre location means this use is not appropriate for this site.	No change necessary.

<b>Resident</b>	The area would benefit far more from having additional retail and entertainment facilities on that site than it would from having hundreds of new homes.	The Core Strategy defines retail, leisure and entertainment facilities as town centre uses. The Brief already explains why residential uses as part of a mixed use development are appropriate for this site.	No change necessary.
<b>Resident</b>	We need somewhere for the youth in the area to go. A cinema would be good.	Cinemas are a town centre use, it is against planning policy to locate this town centre use in an ' <i>out of town</i> ' location.	No change necessary.
<b>Resident</b>	The large majority of Mill Hill residents want and are in dire need of more leisure facilities outside of the small individual shops of Mill Hill Broadway. The proposal does not address this at all.	National guidance defines the main town centre uses. This definition includes retail development, leisure, entertainment facilities such as cinemas, restaurants, pubs, offices and theatres, museums and hotels. As leisure is included in this list of town centre uses, this site's out of town centre location means this use is not appropriate for this site.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 1.2</b> MHPS do not agree with all the objectives laid down for the site (see above). While we accept that one of the objectives for the site should be that "new and ancillary small-scale 'non-destination' retail and leisure uses that serve the needs of the new development" should be permissible; we do not accept that "new and ancillary community space, such as a	The application will need to be accompanied by a Transport Assessment which will consider the traffic implications resulting from all uses. Colindale, as an adjoining area is raised in the Brief. To improve interconnectivity	No change necessary.

	nursery, that serves the needs of Colindale and Mill Hill” should be allowed. In the latter instance this would simply add to the traffic in and out of this site as certainly in the case of a nursery parents would deliver and collect their offspring by car thus exacerbating the considerable traffic issues. In fact we are dubious as to why Colindale comes into this Brief at all. The last item in this clause reads “improvements to existing transport infrastructure and creation of a new pedestrian and cycle links to .... Colindale.”	between different areas within Barnet, the Brief seeks to improve connectivity with Colindale.	
<b>Mill Hill Preservation Society</b>	<b>Para 1.3:</b> Again this clause references Colindale – “New uses to serve the needs of Small & Medium Enterprise businesses and community uses primarily to serve the needs of Colindale and Mill Hill”. MHPS see the site predominantly as a Mill Hill site due to the nature of the railway and motorway constraints.	Colindale is close to the site and as Entrepreneurial Barnet identifies that a significant proportion of Barnet’s population work locally, it is conceivable that Colindale residents may work in new employment spaces at Pentavia. This would improve social integration of the Pentavia site with its surrounding residential areas.	No change necessary.
<b>Mill Hill Preservation Society</b>	<b>Para 3.22:</b> Meadows Partners has not justified, except by implication in narrow short-term financial gains, the reason to build substantial residential units on the site. Whilst the need for additional housing across London is unarguable, so is the need for areas to have balanced development of residential building alongside a proper level of community and transport infrastructure with retail/commercial facilities that foster a vibrant local economy. The Brief should put greater emphasis on the potential of this site to provide	The Brief is clear that new residential uses will be part of a mixed use development in order to achieve such balance advocated by the Mill Hill Preservation Society.  We recognise the importance of consumer choice in our Local Plan while emphasising the need to attract inward investment to out	No change necessary.

	all types of non-residential infrastructure. The “town centre first” policy does not mean that Mill Hill Broadway could accommodate larger retail units of the type historically on the Pentavia site. Indeed the Pentavia site was seen by many residents as complementary to the small-scale shops of the Broadway, and with its closure Mill Hill residents must drive further afield (to Borehamwood for instance) in order to use facilities that could be accommodated on Pentavia. This damages the local economy.	of town centres. However, shopping habits are changing with the rise of internal retail and the growth of click and collect premises in town centre locations. The Pentavia Retail Park is considered to have failed as a modern and sustainable development. We have no desire to make out of town centre retail developments more successful.	
<b>Resident</b>	It is my view that this site has been enjoyed by the local population for a long time and should remain a retail park. The developers are simply taking advantage of the need for new housing, however this is not an ideal site for that purpose.	The Planning Brief has identified why residential uses would be appropriate for this site.	No change necessary.

#### Other comments

<b>Respondent</b>	<b>Response</b>	<b>Council Reply</b>	<b>Action</b>
<b>Resident</b>	Difficulty of a second access point to the development – the height/gradient of any access road for cars/fire engines/ambulances would see not be viable.	Future applications should have due regard to <b>Manual for Streets (2010)</b> . See the relevant text from this document below: Para 5.2.5 <i>‘The gradient of pedestrian routes should ideally be no more than 5%, although topography or other</i>	Add to paragraph 7.14 the following text: <i>‘Due consideration must be given to the acceptability of the topography of pedestrian footways and new roads to ensure they comply with gradient recommendations outlined in the Manual for Streets (2010),</i>

		<p><i>circumstances may make this difficult to achieve. However, as a general rule, 8% should generally be considered as a maximum, which is the limit for most wheelchair users, as advised in Inclusive Mobility'.</i></p> <p><i>8.4.1: 'A maximum longitudinal carriageway gradient of 6% is desirable (TD 9/93 para 4.1), although a gradient of 5% is desirable where there are significant numbers of pedestrians walking along the route'.</i></p> <p><i>8.4.2 'In hilly areas steeper gradients will be frequently required, but a gradient of 8% should be regarded as a practical maximum unless there are particular local difficulties. This is also the maximum gradient that a manual wheelchair can negotiate'.</i></p> <p>Regard must also be given to <b>Shaping Neighbourhoods Accessible London: Achieving an Inclusive Environment SPG October 2014</b> Appendix 7 page 121 '<i>Ensure that length to gradient ratios of footpaths and other routes do not</i></p>	<p><i>specifically paragraphs 5.2.5, 8.4.1 and 8.4.2; and Shaping Neighbourhoods Accessible London: Achieving an Inclusive Environment SPG October 2014, specifically appendix 7 page 121'.</i></p>
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		<i>exceed 2000mm at 1 in 12 and 5000mm at 1 in 15...routes to entrances should not be steeper than 1 in 15'.</i>	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 2.1</b> The Brief states there are 9600m2 of available floor-space. However in paragraph 6.12 it says 8200m2. Is this an error or are they different measurements?	The figure of 8200m2 relates to the size of the warehouse building footprint and not to the actual amount of floorspace within these buildings. The 8200m2 also doesn't take into account the footprint to the TGI Friday's building.	Text amended in para 2.1 to include '(this figure does not include internal floorspace of the warehouse buildings or the footprint of the TGI Friday building)'.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 4.3</b> The Brief should request that cross sections should be drawn to include adjacent areas of housing and not simply through the site.	Cross section drawings should include adjoining roads and housing.	Add the following text to para 7.1 ' <i>Cross section drawings should be submitted as part of any future application showing the relationship with the new development and adjoining roads and housing</i> '.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 4.12</b> Figure 12 on constraints should indicate more explicitly all adjacent low rise residential areas.	It is noted that there is low rise housing to the east of the site that has not been demarcated on Figure 12, although para 6.2 of the Brief does make reference to this area of housing. Para 6.16 states that proximity of the site to low rise residential areas of	Low rise residential demarcation on Figure 12 has been extended to include low rise housing to the east of the site.

		Mill Hill to the east, entails that the height of any new build should not have a detrimental impact on these neighbouring properties in terms of overbearing and overshadowing.	
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.3</b> The Brief could make clearer the desire to provide substantially greater business use, given the proximity of the site to Central London and both the M1 and the A1.	The Brief's objectives require the provision of employment floorspace as part of a mixed use scheme. It is considered that a range of uses would be appropriate for this site and would comply with planning policy.	No change necessary.
<b>Mill Hill Neighbourhood Forum</b>	<b>Para 6.5</b> The use of an LEA is welcomed.	Noted.	No change necessary
<b>Mill Hill Neighbourhood Forum</b>	The subtitle in the draft Brief after Para 6.11 should include the word "suburban" rather than word "urban". This reflects better both the nature of the broader area in which any development needs to sit, along with the more specific guidelines about density and mass of any proposed buildings.	Notes to Table 3.2 of the London Plan define urban and suburban settings. It is considered that the Pentavia Retail Park lies in an urban setting as surrounding built character consists of predominantly terraced housing with some blocks of flats to the east, mansion style blocks to the North and East within Churchill Place and off Bunns Lane and a large block building accommodating a car showroom which is effectively 4 storeys in	No change necessary.

		<p>height. There is also a mix of uses in the immediate area including nursery, car showroom, petrol station, school and a college. The nearby major transport infrastructure is not characteristic of a suburban site. The site as currently presented with large building footprints and areas of hard surfacing and lack of residential uses is not suburban in character.</p>	
<p><b>Quod on behalf of Meadow Residential</b></p>	<p>Planning Brief does not comply with NPPF as not:  <b>Positively prepared:</b> The Brief proposes that Pentavia Retail Park is an appropriate site to meet a variety of business needs. The site is not identified as an existing employment site and is not located in Barnet’s priority town centres (Edgware, North Finchley, Finchley Church End and Chipping Barnet) where new mixed use commercial floorspace is encouraged. We therefore do not agree with the Planning Brief on this aspect as there is no sound policy basis for this approach.</p>	<p>The Brief has been positively prepared through engagement with Meadow Residential, Mill Hill Neighbourhood Forum and the wider community. Creating a sustainable, mixed use development on a physically constrained site of low environmental quality in an outmoded, out of town centre location whilst reuniting the site with the surrounding area is a positive outcome. We encourage the provision of employment floorspace to meet the changing needs of modern businesses across Barnet. This need is recognised in Entrepreneurial Barnet 2015-2020 which states that ‘many of our businesses are</p>	<p>Following text to be added to Section 3: <b>‘Entrepreneurial Barnet 2015-2020 states that many of the borough’s businesses are owned by residents and a significant proportion of our residents (around 40%) work locally. Entrepreneurial Barnet also identifies Mill Hill as an area for growth. This document goes on to state that this growth will create new opportunities for businesses looking to start-up, invest and grow, and for local people to find new jobs and develop new skills’.</b></p>

		<p>owned by residents and a significant proportion of our residents (around 40%) work locally'. The new residential use proposed by the Planning Brief at this site will create a new workforce population. In order to deliver our corporate objectives as set out in Entrepreneurial Barnet we highlight that new workspace should be provided within the site to provide opportunities for new residents as well as local communities.</p> <p>Entrepreneurial Barnet also identifies Mill Hill as an area for growth. This document goes on to state that <i>'this growth will create new opportunities for businesses looking to start-up, invest and grow, and for local people to find new jobs and develop new skills'</i>. The objective for new modern business space to meet the needs of SMEs is in line with the aims of Entrepreneurial Barnet which further demonstrates that the Brief has been positively prepared.</p>	
<b>Quod on behalf</b>	Planning Brief does not comply with NPPF as not:	The Planning Brief sets the	Amendment to para 2.4 the

<p><b>of Meadow Residential</b></p>	<p><b>Justified:</b> The Council state that the Brief considers a number of land uses for the site and has been justified against the relevant policies. However, the Brief fails to acknowledge the existing use of the site as an unrestricted Open A1 Retail Park. It must recognise that the clear alternative for this site is to retain the existing unfettered retail use.</p>	<p>parameters for the future development of this outmoded out of town centre retail park. Core principles of the NPPF encourage the effective use of land by reusing land that has been previously developed (brownfield land), provided that it is not of high environmental value. The NPPF promotes mixed use developments, and encourage multiple benefits from the use of land in urban and rural areas. A mixed use scheme at Pentavia can deliver more benefits than a single use scheme be it retail or residential Retention of the existing use is a decision for the landowners and this is acknowledged in para 2.1.</p>	<p>following text ‘Recent relevant planning applications have been listed in Appendix 3. These include the most recently approved full planning applications for this site (14/08075/FUL, 15/01820/FUL and 15/01825/FUL) and a certificate of Lawful Development (W00408BQ/06) allowed at appeal in 2008 (appeal reference APP/N5090/X/07/2034877) which confirms the lawful use of units to be any use within the A1 Class’.</p>
<p><b>Quod on behalf of Meadow Residential</b></p>	<p>Planning Brief does not comply with NPPF as not: <b>Effective:</b> We would argue that in order for the Brief to be deliverable, the Brief should recognise the sites high existing use value. It is therefore necessary for the value of this development to exceed the Existing Use Value if the applicant is to be incentivised to bring forward an alternative use.</p>	<p>The existing use of the Retail Park is reflected through the Brief. It is agreed that more details can be provided in the Brief relating to the site’s planning history.</p>	<p>Reference has been made to the unlimited A1 use class in para 2.4. Appendix 2 details recent planning permissions.</p>
<p><b>Quod on behalf of Meadow Residential</b></p>	<p>Planning Brief does not comply with NPPF as not: <b>Consistent with national policy:</b> The Planning Brief must be consistent with paragraphs 153 and 182 of the NPPF.</p>	<p>The Planning Brief is consistent with the NPPF.  In regard to para 153 we consider that this Planning Brief will help</p>	<p>No change necessary.</p>

		<p>developers to come forward with proposals that bring this site into more beneficial use. We do not consider that supporting a mixed use development and setting out the Council's objectives at Pentavia will add unnecessary financial burdens. The addendum to the report presented to Policy and Resources Committee on 1<sup>st</sup> September provides further explanation.</p> <p>Para 182 refers to the preparation of the Local Plan. Barnet's Local Development Scheme 2016 lists all Local Plan documents. This is a Planning Brief which provides an opportunity to bridge the gap between the provisions of the Local Plan and the requirements of any planning application for the site.</p>	
<b>Quod on behalf of Meadow Residential</b>	<p>The Brief fails to acknowledge the existing use of the site as an unrestricted Open A1 Retail Park. This particular use is the most valuable of all non-residential uses. The value is crystallised by the following recent retail planning permissions approved by Barnet Council:-</p> <ul style="list-style-type: none"> <li>➤ Planning Permission ref: 14/08075/FUL, date approved 05/08/16;</li> <li>➤ Planning Permission ref: 15/01820/FUL, date approved 05/08/16; and</li> </ul>	<p>The Brief has been revised in regard to the open A1 use and recent planning history. As stated in the Addendum of the report presented to Policy and Resources Committee on 1<sup>st</sup> September '<i>Planning Briefs do not assess viability issues. This will be considered at a later stage prior</i></p>	<p>Following text to be added to para 2.4: '<i>Recent relevant planning applications have been listed in Appendix 3. These include the most recently approved full planning applications for this site (14/08075/FUL, 15/01820/FUL and 15/01825/FUL) and a</i></p>

	<p>➤ Planning Permission ref: 15/01825/FUL, date approved 05/08/16.</p> <p>It is therefore necessary for the value of this development to exceed the Existing Use Value if the applicant is to be incentivised to bring forward an alternative use. Clearly a development of a lesser scale which does not meet this NPPF viability test, would not be delivered.</p>	<p><i>to the submission of a planning application. The Planning Brief therefore does not 'devalue' the site'.</i></p>	<p><i>certificate of Lawful Development (W00408BQ/06) allowed at appeal in 2008 (appeal reference APP/N5090/X/07/2034877) which confirms the lawful use of units to be any use within the A1 Class'.</i></p> <p>Addition of planning history appendices detailing the recent permissions outlined Quod's consultation response.</p>
<p><b>Quod on behalf of Meadow Residential</b></p>	<p>The site is a "windfall" site, assisting the Borough in meeting its objectively assessed housing needs. The site is not allocated for any particular use and lies close to residential areas to the north, east and west of the site.</p> <p>As LB Barnet is not meeting its housing needs, and is only achieving 55% of the London Plan Housing Target for the Borough (London Plan Annual Monitoring Report 2014/2015), then residential is the priority use for this site, beyond other uses.</p> <p>This fundamental objective for the site is not clearly emphasised within the Brief. Paragraph 1.2 mentions residential uses but in a convoluted way. The first bullet point of paragraph 1.2 be amended to state that redevelopment should be 'residential led' rather than 'mixed use'.</p>	<p>The Brief is clear that it supports a sustainable, mixed use development of which a significant proportion will be residential. The Brief is also clear in describing the site's relationship with nearby residential areas to the north, east and west of the site.</p>	<p>No change necessary.</p>
<p><b>Quod on behalf of Meadow Residential</b></p>	<p>This is a new inclusion within the Brief, and it is unclear why it is proposed, certainly when one considers:-</p> <ul style="list-style-type: none"> <li>▪ The existing use</li> <li>▪ The borough's failure to meet its housing needs, and housing being a priority use</li> <li>▪ The objective to meet affordable housing needs</li> </ul>	<p>As per the objectives listed in para 1.2, this Brief does seek a mixed use scheme which provides residential, employment, non-destination retail and community uses.</p>	<p>No change necessary.</p>

	<ul style="list-style-type: none"> <li>▪ The viability impact of delivering SME floorspace on site</li> <li>▪ Barnet’s development plan policy on SME floorspace The site is not identified as an existing employment site and is not located in Barnet’s priority town centres. The site is not considered an appropriate site to solely meet business needs, rather a mixed use, multi-use approach which provides wider development and economic benefits. The delivery of lower value floorspace would not confirm with the NPPF paragraph 153.</li> </ul> <p>The delivery of such lower value floorspace would not conform with the NPPF paragraph 153 and it appears as an onerous and unsound inclusion.</p>	<p>The provision of employment floorspace on this site is in line with Entrepreneurial Barnet, which states that <i>‘many of our businesses are owned by residents and a significant proportion of our residents (around 40%) work locally’</i>. The new residential use proposed by the Planning Brief at this site will create a new workforce population. In order to comply with the terms of Entrepreneurial Barnet, new workspace should be provided within the site to allow the new residential population to work locally within the site.</p> <p>Entrepreneurial Barnet also identifies Mill Hill as an area for growth. This document goes on to state that <i>‘this growth will create new opportunities for businesses looking to start-up, invest and grow, and for local people to find new jobs and develop new skills’</i>. The objective which</p>	
<b>Quod on behalf of Meadow Residential</b>	The Brief confirms that as this site is not within a strategic location, tall buildings of 8 storeys or more in height will not be supported. We consider that there are material	Local planning policy is clear regarding the siting of tall buildings within the borough.	Para 3.19 includes the following text: <i>‘Policy DM05: Tall buildings States that all buildings outside the</i>

	<p>considerations which weigh in favour of not complying with this:-</p> <p>i. We believe that housing need in Barnet is a fundamental issue which requires an optimised approach to site capacity. An increased minimum housing target has been set for Barnet between 2015/16 and 2024/25 in the London plan (2016) which suggests that Barnet’s policies for growth areas, and tall building locations, are fundamentally out of date.</p> <p>ii. Other factors include the protection of green belt, substantial need for affordable housing, and encouraging the effective use of underutilised brownfield sites.</p> <p>iii. The need to create an appropriate residential environment.</p> <p>iv. The site is characterised by tall buildings to the west of the M1 (Motorway).</p> <p>v. The need to deliver a viable development and incentivise alternative land use options.</p> <p>Reference should be made to paragraph 7.25 of the London Plan which states that ‘Tall and large buildings are those that are substantially taller than their surroundings, cause a significant change to the skyline or are larger than the threshold sizes set for the referral of planning application to the Mayor’. In this location the referral height is 30m (10 storeys equivalent).</p>	<p>Pentavia is not a strategic location for tall buildings. No new tall buildings have been approved outside of the strategic locations highlighted in the Local Plan policy CS5 since adoption in September 2012. The Colindale AAP is only applicable to the regeneration area and therefore cannot be reference in the context of Pentavia.</p> <p>Reference has been added to the specific Local Plan policy on Tall Buildings.</p> <p>The Brief is also clear in describing the site’s built environment context.</p> <p>As per the addendum to the Planning Brief, viability is not a consideration at this stage.</p>	<p><i>strategic locations identified in the Core Strategy will not be considered acceptable. Proposals for tall buildings will need to demonstrate:</i></p> <p><i>i. an active street frontage where appropriate</i></p> <p><i>ii. successful integration into the existing urban fabric</i></p> <p><i>iii. a regard to topography and no adverse impact on Local Viewing Corridors, local views and the skyline</i></p> <p><i>iv. not cause harm to heritage assets and their setting</i></p> <p><i>v. that the potential microclimatic effect does not adversely affect’</i></p>
<p><b>Quod on behalf of Meadow Residential</b></p>	<p>Paragraph 6.19 of the Planning Brief confirms that any development proposal at this site should account for roofline interest by varying the height of proposed buildings. It goes onto state that a monotonous roofline motif at this location will have a detrimental impact on the surrounding areas and that some roofline interest might frame the sky exposure of views from adjacent areas.</p>	<p>It is considered that both environmental protection through building design and the implementation of interesting design techniques including varied rooflines are both achievable.</p>	<p>No change necessary.</p>

	<p>The reference to monotonous roofline having a detrimental impact should be removed particularly given that the design, layout and height of any proposed buildings at this site will be dependent on responding to the environmental context and ensuring appropriate measures against noise and air pollution. The treatment of visible elevations are an important consideration in any application and can ensure overall legality of the views from adjacent areas.</p> <p>We</p>		
<b>Woodland Trust</b>	<p>Woodland Trust recommends adding a new paragraph, in between paragraphs 7.3 and 7.4: <i>“The Council will seek an increase of tree canopy cover through new development, due to the wealth of evidence on the many benefits this provides, including improving: physical and mental health; air quality; water quality; water management (reducing flooding); shading; cooling through evapotranspiration; as well as the more obvious benefit of improving biodiversity.”</i>;</p>	<p>The Council welcomes the text from the Woodland Trust.</p>	<p>Text provided by consultee is added to the Planning Brief.</p>
<b>Woodland Trust</b>	<p>That the Mayor’s <i>London Tree and Woodland Framework</i> is added to the list of London policy documents in Appendix 1, and TDAG’s <i>Trees in the Townscape</i> and the Woodland Trust’s <i>Residential Development and Trees</i> are added as new references.</p>	<p>The focus of Appendix 1 is on the main policy framework upon which any application at this site will be considered.</p>	<p>No change necessary</p>
<b>Woodland Trust</b>	<p>Your strategy mentions the need to control flooding, so it would be useful to emphasise the importance of retaining large-crowned trees, and referring to the research by the University of Manchester which has shown that increasing tree cover in urban areas by 10 % reduces surface water run-off by almost 6%. The Woodland Trust has also</p>	<p>The Council welcomes the text from the Woodland Trust.</p>	<p>Include the following text to para 7.4 <i>‘Recent research shows that increasing tree cover in urban areas by 10 % reduces surface water run-off by almost 6%. The implementation of trees across</i></p>

	<p>produced a policy paper illustrating the benefits of trees for urban flooding – <i>Trees in Our Towns – the role of trees and woods in managing urban water quality and quantity</i> (<a href="http://www.woodlandtrust.org.uk/mediafile/100083915/Trees-in-our-towns.pdf">www.woodlandtrust.org.uk/mediafile/100083915/Trees-in-our-towns.pdf</a>).</p> <p>Therefore, the Woodland Trust would like to see trees acknowledged with more detail of their role on flood amelioration in the Planning Brief.</p>		<p><i>the site is very important to reduce the risk of on-site flooding.'</i></p>
<p><b>Woodland Trust</b></p>	<p>Trees play an important role in urban climate change strategies, as increasing tree cover in urban areas can help mitigate the urban heat island through direct shading and by reducing ambient air temperature through the cooling effect of water evaporation from the soil via plant leaves. The shading provided by trees can also reduce energy use for heating and cooling buildings. I suggest this could be explicitly stated in your Strategy.</p> <p>Therefore, trees specifically should be acknowledged within the Brief as being able to help combat climate change, with a suggested new paragraph: "Increasing tree cover in urban areas can help mitigate the urban heat island through direct shading and by reducing ambient air temperature through the cooling effect of water evaporation from the soil via plant leaves. The shading provided by trees can also reduce energy use for heating and cooling buildings."</p>	<p>The Council recognises the contribution of trees to combatting climate change and welcomes this text from the Woodland Trust.</p>	<p>The following text is to be added to para 7.4 <i>"Increasing tree cover in urban areas can help mitigate the urban heat island through direct shading and by reducing ambient air temperature through the cooling effect of water evaporation from the soil via plant leaves. The shading provided by trees can also reduce energy use for heating and cooling buildings."</i></p>
<p><b>Mill Hill Preservation Society</b></p>	<p><b>Para 1.1</b> This clause presumes the site will be mixed development. MHPS think that the Brief should not presume the nature of the development and needs rewording. More fundamentally we do not believe that the case for changing the use of the site from A1/A3 to mixed use has been definitively made. We think the Brief should presume a continuation of the existing type of</p>	<p>The Core Planning Principles of the NPPF states that planning should 'promote mixed use developments, and encourage multiple benefits from the use of land in urban and rural areas'. The objective for a mix of uses on</p>	<p>Inclusion of this core planning principle in the Planning Policy Framework section of the Brief.</p>

	<p>use. Pentavia Park, as a retail site, was successful for almost 25 years. Retail/leisure uses have been previously approved on this site. The site confined by the A1 and M1 is not suitable for residential properties.</p>	<p>this site complies with this objective.</p> <p>The Brief gives clear guidance on the environmental mitigations which will be required.</p>	
<p><b>Mill Hill Preservation Society</b></p>	<p><b>Para 3.16</b> We believe the Brief should state that any proposed residential development must meet, as a minimum, the space and design standards laid out in the London Plan. Furthermore, we think the Barnet Housing strategy 2015 – 2025 (page 12) is misquoted in the Brief and should be corrected. It says ... <i>“The Local Plan 2012 recognised the need for a range of accommodation tenures and sizes to reflect the needs of a changing and growing population, and, taking account of the market’s predisposition to provide one and two bedroom homes, prioritised larger family homes of 3 bedrooms or more across affordable, intermediate and private developments.”</i> This implies there should be an emphasis on larger type accommodation rather than the market pre-disposition toward one and two bedroom units.</p>	<p>In response to the new space standards in the March 2016 version of the London Plan the Council has revised SPDs on Sustainable Design and Construction and Residential Design Guidance. These SPDs were adopted in October 2016 and are now referenced in Appendix 1.</p> <p>Policy DM08 is our Local Plan dwelling mix policy. The Housing Strategy reflects on the market’s predisposition for smaller units.</p>	<p>Add to section 3’Policy 3.5 Quality and design of housing developments.</p> <p>The design of all new housing developments should enhance the quality of local places, taking into account physical context; local character; density; tenure and land use mix; and relationships with, and provision of, public, communal and open spaces, taking particular account of the needs of children, disabled and older people.</p> <p>Table 3.3 outlines the minimum space standards for new dwellings.</p>
<p><b>Mill Hill Preservation Society</b></p>	<p><b>Figure 15 Para 6.6</b> We object to this diagram because it shows various uses for the site in an irrational way. There is no need for the employment zone to be limited to where shown; no need for the amenity space to be limited to where shown; no need for the community space to be limited to where shown; the key for housing is</p>	<p>Figure 15 is an indicative primarily demonstrating the locations for the uses in regard to their relationship with surrounding infrastructure (i.e. green space located in centre of development to create a sheltered amenity;</p>	<p>Figure 15 amended.</p>

	shown all over the site and this seems totally unreasonable given the comments we have made previously. MHPS feel the figure would best be left out of the Brief.	residential uses surround the amenity space to allow residential units will open out onto this green area; office space located where site is narrowest and therefore inappropriate for residential. Figure 15 has been amended to make this more clear.	
<b>Mill Hill Preservation Society</b>	<b>Para 6.8:</b> It is noted that the provision of residential development is phrased as a question. We think the rest of the Brief should follow the same approach and not assume or imply that the site will be a substantially residential development. The availability of any on-site community and retail uses will be used by Mill Hill residents generally and not just residents of any proposed residential development.	The objectives for the Planning Brief request a range of uses. It is likely that any future scheme will include a significant proportion of residential uses. However, in order to comply with the objectives of the Brief any future development will also need to provide other uses including retail, employment and community. This is to strengthen the future communities on this site, revitalise this location and create a strong sense of place.	No change necessary.
<b>Mill Hill Preservation Society</b>	The MHPS has not checked the accuracy of Appendix 1.	No response required.	Appendix 1 has been updated to add reference to the revised SPDs on Sustainable Design and Construction and Residential Design Guidance.
<b>Environment Agency</b>	We agree the site is in flood zone 1 (low probability of flooding from rivers or sea). We agree that a Flood Risk Assessment will need to be carried out to assess any risk of	Issues relating to ground stability and contamination will be considered at the application	See amendment listed on page 4 in regards to land contamination.

	<p>surface water flooding for the attention of the Lead Local Flood Authority.</p> <p>There are no watercourses or areas of sensitivity for groundwater e.g. Source Protection Zones, major/minor aquifers.</p> <p>However, there is an historic landfill indicated on our maps within the site boundary and therefore potential for land contamination. The Planning Brief may need to mention this and the need to ensure any potential for land contamination is investigated as part of any planning application and remediation to take place where necessary. Given the lack of controlled waters sensitivity at the site, this is probably more relevant to human health risk.</p>	stage and further investigation is therefore merited.	
<b>Natural England</b>	Natural England does not consider that Draft Pentavia Retail Park Planning Brief poses any likely risk or opportunity in relation to our statutory purpose, and so does not wish to comment on this consultation.	Noted.	No change necessary.
<b>Canal River Trust</b>	As the Canal & River Trust does not own or manage any land or water within this area, I can confirm that we have no comments to make. Our closest area of ownership is the West Hendon Reservoir.	Noted.	No change necessary.
<b>Historic England</b>	<p>Having reviewed the document we have no comments to make at this stage.</p> <p>Please note that this advice is based on the information that has been provided to us and does not affect our obligation</p>	Noted.	No change necessary.

	to advise on, and potentially object to any specific development proposal which may subsequently arise from this Planning Brief and which may have adverse effects on the environment.		
<b>Finchley Society and the Hendon and District Archaeological Society</b>	No comments to make at this time	Noted.	No change necessary.

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**POLICY AND RESOURCES COMMITTEE**  
**1 DECEMBER 2016**

<b>Title</b>	<b>Disabled Persons Freedom Pass Review</b>
<b>Report of</b>	Commissioning Director, Environment
<b>Wards</b>	All
<b>Status</b>	Public
<b>Enclosures</b>	Appendix 1 – Disabled Persons Freedom Pass Questionnaire Appendix 2 – Consultation Document Appendix 3 – Consultation Report Findings Appendix 4 – Supporting Information Request Form Appendix 5 – Equalities Impact Assessment
<b>Officer Contact Details</b>	Jamie Cooke, Strategic Lead, Effective Borough Travel <a href="mailto:Jamie.Cooke@barnet.gov.uk">Jamie.Cooke@barnet.gov.uk</a> 020 8359 2275 Sam Pandya, Contract Performance Officer <a href="mailto:Sam.Pandya@barnet.gov.uk">Sam.Pandya@barnet.gov.uk</a> 020 8359 5640

**Summary**

This report summarises the progress of phase two of the review into the Disabled Persons Freedom Passes assessment process and criteria to date. The report makes recommendations regarding the Disabled Persons Freedom Pass process and eligibility criteria and provides the results of the public consultation into the new proposed process and methods of assessing eligibility criteria. Finally, the report outlines the future actions the Disabled Persons’ Freedom Pass Improvement Group intends to take in order to introduce the new process for implementation.

## **Recommendations**

**That the Policy and Resources Committee:**

- 1. Considers the results of the consultation on the Disabled Persons Freedom Pass**
- 2. Approves the revised criteria for Disabled Persons Freedom Passes Applications.**
- 3. Agrees the additional process improvements outlined in section 4 of this report for the rollout of the new improved process**

### **1. WHY THIS REPORT IS NEEDED**

- 1.1 The draft Disabled Persons Freedom Pass Review: Draft criteria for assessment and next steps for implementation was approved by Policy & Resources Committee on 1 September 2016 subject to consultation.
- 1.2 The consultation was conducted for six weeks between 26 September 2016 – 4 November 2016.
- 1.3 The consultation was open to all, but specifically communicated to those currently using the concessionary Freedom Pass Scheme and representative bodies. Paper copies, easy read and large print versions of the consultation were also made available on request.
- 1.4 The consultation questions focused on:-
  - What extent did residents support or oppose the proposed changes for the evidence required for a person to submit.
  - Would the proposed changes have a positive or negative impact to an individual.
  - What help and assistance is required for a service user to renew or apply for a Disabled Persons Freedom Pass; and
  - What is the preferred method of communication.
- 1.5 This report sets out the consultation findings, and also assesses their relationship to the key process improvement proposals. It concludes that the proposed changes are strongly supported by residents and service users.
- 1.6 The Council's vision for its Disabled Persons Freedom Pass application and renewals process is for an exemplar high quality process that provides the best user experience possible for our residents. To achieve this our proposals include an expansion of acceptable documents to support an application, reviewing the way an individual can apply for a Disabled Persons Freedom Pass and making documents more accessible for users. The Council recognises that in order to deliver an excellent service, good access to the process is crucial. Therefore, the Council has committed to continue including

third sector organisations, service users and subject matter specialists in any service developments or proposed changes that could have an impact on any service user.

## SUMMARY OF THE CONSULTATION FINDINGS

- 1.7 The full report is attached in Appendix 3. The consultation was advertised in the local media, and also via social media. Posters were distributed to voluntary organisations, Housing Estates, Police Stations, Libraries and prominent London Borough of Barnet Buildings and adult day centres.
- 1.8 376 responses were received, 76 % of responses were completed via the online survey, 24% were completed using the paper copies made available. (See Appendix five)
- 1.9 Twelve drop-in sessions as illustrated in Table 1 were held across various libraries across the borough for any resident or Disabled Persons Freedom Pass holder to come and discuss the proposed changes. A total of 160 persons attended the drop in sessions.

*Table 1*

<b>Location</b>	<b>Date</b>	<b>Times</b>
<b>Hendon Library</b>	<b>30 September 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>North Finchley Library</b>	<b>3 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Chipping Barnet Library</b>	<b>11 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Burnt Oak Library</b>	<b>19 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Golders Green Library</b>	<b>27 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Edgware Library</b>	<b>3 November 2016</b>	<b>10am - 12pm 2 - 4pm</b>

- 1.10 The key findings on the proposed methods for assessing eligibility criteria are set out in the Consultation Findings Report and are summarised below:

- *Is blind or partially sighted*

The majority of residents 47% said they supported the proposed changes with 14% opposing

- *Is profoundly or severely deaf*

The majority of residents 48% said they supported the proposed changes with 14% opposing

- *Is without speech*

The majority of residents 47% said they supported the proposed changes with 15% opposing

- *Has a disability, or has suffered an injury, which has a substantial and long-term adverse effect on his ability to walk*

The majority of residents 56% said they supported the proposed changes with 17% opposing

- *Does not have arms, or have long term loss of both arms*

The majority of residents 54% said they supported the proposed changes with 14% opposing

- *Has a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning*

The majority of residents 59% said they supported the proposed changes with 14% opposing

- *Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol.*

The majority of residents 61% said they supported the proposed changes with 8% opposing

- *Do you think the proposed changes will have a positive or negative impact on your life?*

The majority of residents 34% stated that the proposals would have a positive impact to their lives. Twenty seven per cent stated that the proposals would have no impact and 24% felt that the proposals would have a negative impact.

1.11 Forty one per cent of respondents preferred to submit evidence via post compared to 26% that wished to upload electronically.

1.12 The Council engaged with organisations as listed in Table B promoting the consultation and advising the reasons for the review. This has enabled a better understanding of the needs of the organisations members and existing

Disabled Persons Freedom Pass holders with the common theme being the fear of passes being withdrawn without justification.

*Table B*

<b>Name of Organisation</b>	<b>Date</b>
Community Barnet	19/09/2016
Barnet African Caribbean Association	20/09/2016
Barnet Older Asian Association	20/09/2016
Barnet Voice for Mental Health	20/09/2016
Barnet People's Choice	20/09/2016
Age UK	06/10/2016
Mencap	10/10/2016
Met Police	10/10/2016
Inclusion Barnet	11/10/2016
Barnet Asian Elders Association	13/10/2016
Space 2 B	28/10/2016
Barnet Voice for Mental Health AGM	31/10/2016
Volunteering Matters	02/11/2016
Learning Disability Parliament	03/11/2016

- 1.13 Five per cent of respondents suggested that evidence from GPs should be accepted as proof of the applicants' disability. However, the Department for Transport Guidance argues that GP evidence is 'an unsatisfactory arrangement'.
- 1.14 To ensure that London Borough of Barnet is compliant with DfT guidance, consideration was given but not recommended as detailed in section 4.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 The consultation shows that 53% of people are in favour of the Councils proposals for providing supporting evidence for Disabled Persons Freedom Passes Applications
- 2.2 Thirty four per cent of residents feel that the proposed changes will have a positive impact whilst 42% stated that it would have no impact/not applicable. Twenty four per cent stated that the proposals would have a negative impact.
- 2.3 The proposals are required to ensure that Barnet Council is more closely aligned to Department for Transport Guidance, meets section 240 of the Transport Act and provides a better quality and more effective service for users.
- 2.4 The Council recognises that historically, Barnet had interpreted an 'eighth criterion' from the Department for Transport (DfT) Guidance which it has referred to as 'Mental Health'. The proposed criteria incorporates Mental Health conditions within the Department for Transport Category of *'Refused a driving licence, other than on the grounds of persistent misuse of drugs or*

*alcohol*' which allows applicants suffering as described in the DfT guidance thus fully adhering to the seven recognised disabilities.

- 2.5 The methods of assessment for the new criteria widen acceptable forms of evidence of eligibility as described in Appendix 2.
- 2.6 As recommended by the Department for Transport Guidance, Barnet will continue using an Independent Medical Assessor, where necessary, to carry out assessments for applicants that fall into category d, (Has a disability, or has suffered an injury, which has a substantial and long-term adverse effect on his ability to walk) It must be noted that the Department of Transport has suggested that using a GP would have the potential to compromise the doctor/patient relationship.
- 2.7 In other categories, medical evidence from a GP can be accepted, for example 'Do not have arms, or have long term loss of both arms', or 'Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the grounds of persistent misuse of drugs or alcohol'. This is an improvement to the service ensuring that an individual does not have to attend an independent medical assessment.
- 2.8 The Council recognises that medical specialists may charge applicants to provide a report confirming 'Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the grounds of persistent misuse of drugs or alcohol'. To mitigate this the Council proposes a GP/Specialist is able to complete a 'Supporting Information Request Form' for an applicant as this form requests answers to factual questions only and does not ask for the opinion of the GP/Specialist so is no cost to the applicant. (The form would be provided by the local authority to the applicant who would be responsible for having it completed by his medical specialist).  
(See Appendix four)
- 2.9 Historically, Barnet Council carried out eligibility checks once every five years for individuals that had qualified for a pass based on benefits received. As part of the proposal, where an individual has received a Disabled Persons Freedom Pass based on benefits, eligibility checks will be aligned with benefit expiry date as illustrated in the following examples.

#### *Example 1*

Person X was issued with a Disabled Persons Freedom Pass on 1 April 2015 with an expiry date of 31 March 2020. However when Person X applied, Person X provided evidence that he/she was in receipt of Higher Rate Mobility Benefit until 1 April 2018. Therefore, Person X would be required to submit their 2018 new award to prove their continuous eligibility for a Disabled Persons Freedom Pass.

## *Example 2*

Person X was issued with a Disabled Persons Freedom Pass on 1 April 2015 with an expiry date of 31 March 2020. Person X provided evidence that he/she was in receipt of Higher Rate Mobility Benefit for life. In this case, every five years a residency check would be carried out. If the individual's circumstances changed, the onus would be on the individual to inform the Local Authority.

- 2.10 The new process encompasses assessment of eligibility criteria that conforms to the s240 of the Greater London Authority Act (as amended), Department for Transport Guidance and promotes the Care Act 2014.
- 2.11 s240 of the Greater London Authority Act (as amended), Department for Transport Guidance and promotes the Care Act 2014.

### Additional process improvements

- 2.12 As part of the review, it has been identified that current processes require improvement to ensure that the service user is able to apply or renew a Disabled Persons Freedom Pass with ease. Therefore, it is proposed that Phase III will look at ways of improving and revising the following areas:
- **Data Cleansing** - Transfer of Disabled Persons Freedom Pass to Older Persons Freedom Passes where an individual has reached the qualifying age. This will lead to a reduction in administration costs as the Older Persons Freedom Pass is administered by London Councils. The current total of pending transfers is 1358 which includes 2 deceased and 23 'Not known at this address'.
  - **Data Matching** – From the consultation, the Council have received 194 returned correspondence stating, 'Not known at this address' which requires further investigation. These cohorts of individuals are still listed as having a Disabled Persons Freedom Pass.
  - **Website information and functionality** – Internal user testing has highlighted that web content requires improvement so that applicants can readily access clear information.
  - **Application Forms** – Forms will be improved so that they offer guidance to applicants. They will also be clearly labelled and incorporate an anti-fraud clause and sharing of information statement. Paper application forms will be updated and introduce a choice of 'Easy Read' and 'Large Print'

- **Communication Templates** – Templates will be created that are suitable for use by the applicant and written in ‘Plain English’
- **Renewals** – All renewals will be communicated in a timely manner with existing pass holders, ensuring that adequate support is given where required.
- **Accessibility** – Whilst the process fully supports the Customer Access Strategy, it is acknowledged that vulnerable persons may need assistance in completing their application. In such cases, there may be a need for a ‘Call Back’ or ‘Face to Face’ assistance; the Customer Support Group would provide the necessary support.
- **Diversity** – The Council recognises that the borough has a diverse population and as such will endeavour to assist applicants where English is not their first language by providing support in their preferred language.
- **Telephone Communication** – The review will ensure that where Interactive voice responses are used, they are clear and transferred to the relevant department in a timely manner, ensuring that the Customer Access strategy is supported.
- **Re-designing applicant journeys end-to-end** – Operational level agreements will be introduced. The benefit of these will be:
  - (i) Clear timescales for applications and renewals
  - (ii) Tracking of all applications
  - (iii) Monitoring Equality & Diversity
  - (iv) Clear process maps for applications/renewals and appeals
  - (v) Expected standards (Letter writing, answering of enquiries and dealing with complaints)
- **Appeals Process** – The Council wishes to introduce a one – step appeal which will be carried out by an London Borough of Barnet Officer removed from direct line management of original decision taker
- **Automatic renewals** – The Council proposes to introduce eligibility review checks to coincide with award expiry dates, to ensure that the individual is entitled to the pass. The pass holder will be required to submit a further award letter in order to have continuing eligibility for the pass. Where an individual has a disability which is considered as permanent the Council accepts that renewals will be carried out automatically providing:
  - The individual is still residing within the Borough
  - The individual can provide evidence/or a remote Council Tax check can take place
- **Desk based assessments** – It is proposed that the Council continues with desk based assessments and Independent Medical Assessments relating to the category ‘Has a disability, or has suffered an injury, which has a

substantial and long-term adverse effect on his ability to walk.’ A full process will be created following approval of the new draft criteria which will also highlight who will actually carry out Independent Medical Assessments.

### **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 The Disabled Persons’ Freedom Pass Improvement Group has considered ceasing the use of an independent medical assessor to determine eligibility and allow applicants to provide medical evidence from their own GP. The main argument against this approach is that it has the potential to compromise the doctor/patient relationship. The Department for Transport guidance and the review group believes that utilising medical assessors is the most appropriate way to determine eligibility for some disability types and where there is doubt of eligibility.

*Extract from Department for Transport Guidance*

*‘For other applicants, where there is any doubt about eligibility, the Department recommends that local authorities seek independent medical evidence to inform their decision. The cost of this should not be borne by the applicant.*

*Using an applicant’s GP to verify that an individual meets the criteria for a concessionary travel pass is regarded as an unsatisfactory arrangement for both the GP and the administrators of the scheme. The main argument against this approach is that it compromises the doctor/patient relationship.*

*The Department strongly recommends that independent health professionals should undertake assessments in place of GPs. In the case of assessment of the inability to walk, for example, occupational therapists or physiotherapists are often best placed to assess eligibility due to their professional knowledge of mobility. Transferring assessment to such specialists implicitly suggests the importance of making judgements based on physical mobility rather than medical conditions’.*

### **4. POST DECISION IMPLEMENTATION**

- 4.1 The future implementation of the Disabled Persons Freedom Pass Process has also been considered. The end to end process to would continue via our partner, Customer Support Group, after a period of training on the revised process and criteria with additional support from the London Borough of Lewisham who have a robust exemplar process established and experienced subject matter specialists to provide training and quality assurance for Barnet’s new process. The proposal is for London Borough of Lewisham staff to support the Barnet Team for two days per week for a period of 26 weeks.
- 4.2 Subject to Policy & Resources Committee approval to proceed, a co-production group working group will be set up involving service users, third sector organisations and other stakeholders who will be involved in

redesigning the application form, communication, lines of support and web access using the feedback collected from the consultation. This co-production group will also test webpages, application forms and telephony channels with any proposed changes being considered before implementation in spring 2017.

## 5. IMPLICATIONS OF DECISION

### 5.1 Corporate Priorities and Performance

5.1.1 The review into Disabled Person's Freedom Passes supports the Council's following organisational values:

- **Fairness:** By providing a fully accessible, transparent and straight forward application process supported by consistent criteria which align with the Department for Transport Guidance, the Care Act 2014 and the s240 of the Greater London Authority Act (as amended).
- **Responsibility:** By recognising that the Local Authority has a responsibility to provide a robust process for the application and renewal of Freedom Pass based on eligibility.
- **Opportunity:** By providing choice and independence to people with disabilities and enabling them to access services, education and employment via assisted travel support.

5.1.2 Disabled Person's Freedom Pass Review will also assist the Health and Wellbeing Strategy by supporting those with disabilities to live independently wherever possible.

### 5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1 Regular monitoring of the budget and reporting will be in place for all stakeholders ensuring that the residents are receiving 'Value for Money'.

5.2.2 Disabled Persons Freedom Passes does not form a budget saving in line with the Medium Term Financial Savings.

5.2.3 It must be noted that the Disabled Persons Freedom Passes review is aiming to obtain the best practice to meet resident's expectations and not to reduce costs. It is possible that the new process may result in increased costs for the Council. The Council recognises this and this is addressed in the risk mitigation section of this report.

5.2.4 The Council believes that by utilising a subject matter specialist from the London Borough of Lewisham will incur a cost to the London Borough of Barnet. This cost has yet to be determined and will be funded from the parking reserve.

For 2015 renewals, there was an additional fee of £100,000 that was payable and funded from central expenses.

### 5.2.5 Social Value

5.2.6 The proposals outlined in this report seek to ensure that the revised criteria achieve the Council's vision to allow full access for disabled persons to apply for a Disabled Persons Freedom Pass ensuring that the criteria is fair, accessible and conforms to the s240 of the Greater London Authority Act (as amended), Department for Transport Guidance and promotes the Care Act 2014. The vision for Barnet is to allow disabled persons to access the service at ease, and where assistance is required, this is always available ensuring residents are treated with respect, dignity and fairness.

### 5.3 Legal and Constitutional References

5.3.1 Section 240 of the Greater London Authority Act 1999 as amended by section 151 the Transport Act 2000 provides the statutory basis for travel concessions on journeys in and around Greater London.

5.3.2 The Concessionary Bus Travel Act 2007 ('the 2007 Act') provides for a statutory guarantee of free off-peak travel for eligible older and disabled people on local bus services anywhere in England ('the national concession'). Provisions in the 2007 Act have been commenced to enable the national concession to begin on 1 April 2008.

5.3.3 The 2007 Act modifies existing legislation which guarantees free off-peak local bus travel in England only within the area of the local authority in which an eligible person resides. The grant of concessions is governed outside Greater London by sections 145 to 150 of the Transport Act 2000 ('the 2000 Act') and within London by sections 240 to 244 of, and Schedule 16 to, the Greater London Authority Act 1999 ('the 1999 Act').

5.3.4 [Annex A to the Responsibility for Functions](#) (Council Constitution) sets out the terms of reference of the Policy and Resources Committee and states that 'if any report comes with the remit of more than one committee, to avoid the report being discussed at several committees the report will be presented and determined at the most appropriate committee. If this is not clear, then the report will be discussed and determined by the Policy and Resources Committee'. In this case the report recommendations cut across the Environment Committee which has specific responsibility for transport and the Adults and Safeguarding Committee, which is responsible for promoting the best possible adult social care services.

5.3.5 [Section 6.5 of the Responsibility for Functions](#) (Council Constitution) defines a key decision as one which:

- will result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates; or

- is significant in terms of its effects on communities living or working in an area comprising two or more wards.

5.3.6 The [approval](#) of the draft Disabled Persons Freedom Pass eligibility criteria would be significant in terms of its effects on communities living or working in all wards.

#### 5.4 Risk Management

5.4.1 The main risks associated with Phase II of Disabled Person's Freedom Pass Review are as follows:

- Improvement of eligibility criteria and method of assessment may lead to dissatisfaction of some existing pass holders who may no longer be eligible. This risk will be mitigated by the new process being more closely aligned with the Department for Transport (DfT) Guidance for assessment meaning transparent and justifiable eligibility criteria to determine entitlement which applies to all residents. Where there is a need to withdraw a Disabled Persons Freedom Pass, the pass holder will be contacted 3 months in advance of cessation and will have the opportunity to submit an appeal.
- It has been identified that the new draft criteria has removed Mental Health which has been incorporated within category g 'Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol'. This could entail that an individual who obtained a Disabled Person Freedom Pass historically under mental health may no longer be eligible under the new draft criteria.
- Withdrawal of temporarily issued passes when the new criteria are implemented. There is a risk that some residents who have had their Disabled Persons Freedom Passes temporarily reactivated will subsequently not meet the new eligibility criteria and will therefore have their Disabled Persons Freedom Passes deactivated. This risk will be mitigated by affected residents receiving appropriate and timely communication and support.
- It has been recognised there may be additional costs associated with assessments of applicants. This risk will be mitigated by the 'Supporting Information Request Form' designed for GP to complete which will provide factual answers. (See Appendix 4)

#### 5.5 Equalities and Diversity

5.5.1 The applications and renewal process and the eligibility criteria will be subject to a full equalities impact assessment. (See appendix 5) These proposals have been formulated bearing in mind the Council's Public Sector Equality duty as set out below.

5.5.2 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- advance equality of opportunity between people from different groups
- foster good relations between people from different groups

5.5.3 The relevant protected characteristics are:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion and belief
- Sex
- Sexual orientation

5.5.4 The broad purpose of this duty is to integrate considerations of equality into day business and keep them under review in decision making, the design of policies and the delivery of services

5.5.5 In addition all templates should advise the inclusion of:

- Up to date information about the Equalities impact of the proposal and details of how this has been assessed
- Sources of data
- Assessment of equalities risks and what has been done to mitigate them

5.5.6 Freedom Passes are one way of supporting people with disabilities to maintain a level of independence and therefore it is important to ensure that the eligibility criteria and the process of assessment allows everyone who is eligible to apply and receive a pass.

5.5.7 The Council and our delivery partner, Customer Support Group (CSG), recognise a responsibility to make changes to the Freedom Pass applications and renewal process so that all applicants will receive equal treatment. It is recognised that applicants may require reasonable adjustments to be made to the process which take account of their specific disabilities under the 2010 Equality Act.

5.5.8 The process will therefore offer a choice of contact methods:

**Web**

Applicants will have access to the Barnet website and London Councils for help and assistance

**Telephone**

Applicants will be offered support via the telephone Monday-Thursday between the hours of 9am - 5.15pm and Friday 9am - 5pm.

### **Face-to-face**

In the case where an individual needs face-to-face support, this will be provided at Barnet House and Burnt Oak Library.

### **Email**

Applicants have the option to email for support.

### **Communication**

Alternative formats of documents will be available upon request including 'Easy Read' and 'Large Format'

5.5.9 We are satisfied that the new process will be accessible to all residents taking into account their particular circumstances and disabilities. All communication materials will be available in a variety of accessible formats to take account of applicants' specific needs and presented in a manner that is easy for them and their carers/advocates to access and understand.

5.5.10 The change to the eligibility criteria may impact 376 pass holders who have obtained Disabled Person Freedom Passes under the current criteria of Mental Health. It is proposed that those who may no longer be eligible under the new draft criteria are allowed to retain their pass until the renewal date in 2020. This cohort of pass holders will be given 12 months notification that they will be required to renew their pass under the new criteria. There is a risk that these individuals may not be eligible under the new draft criteria.

5.5.11 Family services work with children and young people up to the age of 18 with the exception of Onwards and Upwards (the leaving care service) which works with young people who qualify for the service until the age of 21 or 25 if they are in education and the 0-25 Service.

## **5.6 Consultation and Engagement**

5.6.1 A consultation was carried out from 26 September to 4 November 2016. The consultation invited service users, residents and volunteers to give their views on the proposed changes to the assessment of eligibility.

5.6.2 The method of consultation involved an online questionnaire, paper questionnaire available in alternative formats and a consultation document for additional information on the proposals and background information. Drop-in sessions were also available at six libraries during September, October and November.

5.6.3 Following this report being agreed by this committee, a user testing group will be set up during December 2016 inviting Barnet Volunteers, third sector organisations and vulnerable persons to carry out user testing of the revised criteria, web access, application forms and sample responses before implementation in spring 2017.

## **5.7 Insight**

5.8.1 Insight on the needs of resident groups has been utilised to inform the review and the areas in which the process needs to be improved.

5.8.2 Further insight from the planned user group testing and consultation will inform and guide the design of the final improved Disabled Persons Freedom Pass Process and assessment of eligibility criteria.

## **6. BACKGROUND PAPERS**

6.1 Policy and Resource Committee 17 May 2016

Report: Member's Item, Disabled Persons' Freedom Passes

<http://barnet.moderngov.co.uk/documents/s31818/Members%20Item%20-%20Cllr%20Barry%20Rawlings.pdf>

Minutes (Item 6a)

<http://barnet.moderngov.co.uk/documents/g8354/Printed%20minutes%2017th-May-2016%2019.00%20Policy%20and%20Resources%20Committee.pdf?T=1>

6.2 Section 240 Greater London Authority Act:

<http://www.legislation.gov.uk/ukpga/1999/29/section/240>

6.3 Department for Transport Guidance

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/181507/eligibility-review.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/181507/eligibility-review.pdf)

6.4 DVLA guidelines on medical fitness:

<https://www.gov.uk/government/publications/assessing-fitness-to-drive-a-guide-for-medical-professionals>

6.5 Disabled Persons Freedom Pass Committee Report dated 1 September 2016

6.6 Terms of Reference for the Disabled Persons Freedom Pass Review

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Have your say

# Disabled Persons Freedom Pass Questionnaire

Please complete using block capitals.  
It is important that you read the accompanying instructions.

# Introduction

**Barnet Council is improving the way new applicants and existing Disabled Persons Freedom Pass holders are assessed to see if they qualify for a pass. This will mean a better quality, and more effective service is delivered for all our users.**

We are making improvements to the way that we:

- assess if someone qualifies for a Disabled Persons Freedom Pass, and
- the way that people can apply for a Disabled Persons Freedom Pass.

Our proposals include:

- more ways to provide evidence to support your application
- looking at the ways you can apply for a Disabled Persons Freedom Pass, and
- making documents more accessible for all users.

For more information on our proposals please take the time to read our consultation document and then complete this short questionnaire. It should only take about ten minutes of your time.

We are keen to hear from you as your views and opinions are important to us and will help us to make the right decisions. The council will take into account your responses before a final decision is made by Policy and Resources Committee on 1 December 2016.

Please share your views by completing the following questionnaire and returning it in the reply paid envelope.

## Before completing this survey

Please read the information in this booklet in full before answering questionnaire. You can visit [engage.barnet.gov.uk](http://engage.barnet.gov.uk) or you can email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk) for further information.

If you require this questionnaire in a different format or language, or you would like someone to help you to complete the questionnaire on your behalf, please contact the team on tel: 020 8359 5460 or email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk)

**Thank you for considering to take the time to complete this survey.  
The consultation period will run until 4 November 2016.**

# Instructions

The survey has been designed to make it as easy as possible for you to fill in. Most questions only require you to tick one box. The following guide describes the other instructions you may encounter.

Go to Q	Go to the question number indicated. This may mean you miss out one or more questions, or even the rest of the section, but these questions are probably not relevant to you.
Tick all that apply	Here you may tick as many boxes as you want.
Tick <b>one</b> box on each row	Tick one box in the series of boxes going across each row.
Tick <b>one</b> box in each column	Tick one box in the series of boxes going down each column.
Other <input type="checkbox"/> Write in...	If you tick 'other', write your own answer in the space provided.

Please check that you have answered all the questions that apply to you.

If you tick the wrong box by mistake, please cross it out completely and then tick the right box.

## Confidentiality

To ensure personal information about you is secure, all of your answers will be treated in the strictest confidence, and will be stored securely in an anonymous format.

Please be assured all your answers will be stored in accordance with our responsibilities under the Data Protection Act 1998. The responses under the 'About You' section will only be used by the London Borough of Barnet to review what different sections of the community think of our plans'

Unless you are responding on behalf of an organisation, you do not have to give us your name and you will not be personally identified.

# Section 1: Proposed ways to qualify for a Disabled Persons Freedom Pass

There are no proposed changes to the categories of the recognised disabilities because these categories are as stipulated by the government legislation.

A list of the recognised disabilities can be found on page 6 of the consultation document. However, we are proposing to increase the types of evidence accepted by the council as proof that you qualify for a Disabled Persons Freedom Pass. A table showing the evidence we currently accept and what we propose to accept can be found on pages 6-7 of our consultation document.

It is important you read this document as this will assist you in answering the questionnaire. However, throughout this questionnaire we have also provided detail information about our proposals.

We would first like to know your views on the proposed changes to the types of evidence accepted by the council as proof that you qualify for a Disabled Persons Freedom Pass.

The following questions will ask whether you support or oppose the proposed additional evidence we are going to accept to assess applicants for each of the seven recognised disabilities.

If you do not know the answer to a question or have no opinion please tick, 'don't know/not applicable'.

## Category a: 'is blind or partially sighted'

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- BD8 certificate, or
- Certificate of Visual Impairment (CVI), or
- Barnet Social Care Direct registration number.

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

### 1. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category? (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					
<div style="border: 1px solid black; height: 40px;"></div>					

## Category b: ‘is profoundly or severely deaf’

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- Recent audiology report which states a severe hearing loss of 70-95 dB HL (Hearing Level) and a profound loss of 95+ dB HL, or
- Recent audiogram which states a severe hearing loss of 70-95 dB HL (Hearing Level) and a profound loss of 95+ dB HL, or
- Barnet Social Care Direct registration number.

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

### 2. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category? (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					

## Category c: ‘is without speech’

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- Recent Personal Independence Payments (PIP) award letter scoring 8 points or more for ‘Communicating Verbally’, or
- Recent Medical Evidence from a Speech Therapist.

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

### 3. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category? (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					

## Category d: ‘has a disability, or has suffered an injury, which has a substantial and long-term adverse effect on his ability to walk’

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- Recent Personal Independence Payment (PIP) award letter stating an award of eight points or more for the ‘Moving Around’, or
- Recent Higher Rate Mobility Component of Disability Living Allowance (HRMCDLA) award letter, or
- Recent War Pensioners Mobility Supplement (WPMS) award letter, or
- Mobility assessment by LBB’s Independent Medical Assessor (if Desk Based Assessment returns a score of 8-9 points).

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

### 4. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category? (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					

## Category e: ‘does not have arms or has long-term loss of the use of both arms’

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- Medical Evidence from an applicant’s GP demonstrating:
  - Loss of both arms, or
  - Impairment resulting in loss of use of both arms, or
  - Deformity of both arms resulting in being unable to carry out day-to-day tasks.

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

**5. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?** (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					

**Category f: ‘has a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning’**

A learning disability is a reduced intellectual ability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life.

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- Provide proof of accepted registration with the Barnet Learning Disabilities Services (BLDS), or
- Receiving Services from Barnet Learning Disabilities Services, or
- Recent Clinical Psychological/Psychiatrist Assessment Report, or
- Current Educational Health Care Plan (EHCP) with relevant assessment/Education statement, or
- Receiving benefits relating to their disability.

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

**6. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?** (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					

## Category g: ‘would, if he applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol’

To assess whether someone qualifies for a Disabled Persons Freedom Pass under this criteria, we propose to accept the following evidence:

- Refusal or revocation letter from DVLA, or
- Recent medical evidence of:
  - i. Epilepsy, or
  - ii. Severe mental disorder, or
  - iii. Sudden attacks of fainting, or
  - iv. Inability to read a registration plate at 20.5 metres even with lenses, or
  - v. Other disabilities which are likely to cause the driving of vehicles by them to be a source of danger to the public, or
- ‘Supporting Information Request Form’ completed by a specialist, or
- Evidence of contact with mental health professional in relationship to a mental health diagnosis which has a significant impact on their wellbeing, or
- Subject to Current Mental Health Care Programme Approach, or
- Evidence of receiving benefits such as DLA OR PIP relating to their disability.

A table showing the evidence we currently accept and what we propose to accept can be found on pages 6 and 7 of our consultation document.

### 7. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category? (Please tick **one** box only)

Strongly support	Tend to support	Neither support or oppose	Tend to oppose	Strongly oppose	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Please state your reasons, including whether you think there is other evidence we should accept (please specify below)					

### 8. Do you think we have missed any evidence which should be included in the eligibility for Disabled Persons Freedom Passes? (Please tick **one** option only)

Yes <input type="checkbox"/> 1	No <input type="checkbox"/> 2	Don't know/Not sure <input type="checkbox"/> 3
If you answered ‘Yes’, please state the reasons (please specify below)		

**9. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?** (Please tick **one** box only)

Strong positive impact	Some positive impact	No impact	Some negative impact	Strong negative impact	Don't know/ Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
If you feel it will have a negative impact to you, please give reasons (please specify below)					

**10. How would you prefer to submit evidence to the council of your recognised disability?** (Please tick **one** box only)

Online	<input type="checkbox"/> 1	Don't know/Not sure	<input type="checkbox"/> 6
Email	<input type="checkbox"/> 2	Other (please specify below)	<input type="checkbox"/> 7
Post	<input type="checkbox"/> 3		
In person	<input type="checkbox"/> 4		
Would never apply for Disabled Persons Freedom Pass	<input type="checkbox"/> 5 go to Q14		

**11. If you needed help to complete a form, who would help you?** (Please tick all that apply)

Family	<input type="checkbox"/> 1	Third sector organisation/Voluntary organisation	<input type="checkbox"/> 7
Friends	<input type="checkbox"/> 2	Would not need help	<input type="checkbox"/> 8
Neighbour	<input type="checkbox"/> 3	Don't know/Not sure	<input type="checkbox"/> 9
Carer	<input type="checkbox"/> 4	Other (please specify below)	<input type="checkbox"/> 10
School, college or employer	<input type="checkbox"/> 5		
Citizens Advice	<input type="checkbox"/> 6		

**12. To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?** (Please tick **one** box only)

A lot of support	Some support	A little support	None	Don't know/ Not sure	Not applicable
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

## Section 2: About you

### We want to understand how any changes to Disabled Persons Freedom Passes may impact you.

This means we would like to know whether any changes would directly affect you as a user, or if it may affect you with the support you offer to a user. It will help us to understand the needs of our Disabled Persons Freedom Pass holders and their support networks.

#### 13. To help us understand the feedback you give us, please tick the most appropriate box

(Please tick **one** box only)

I currently hold a Disabled Persons Freedom Pass	<input type="checkbox"/> 1	Go to Q18	
I currently hold an Older Persons Freedom Pass	<input type="checkbox"/> 2	Go to Q21	
I would like to apply for a Freedom Pass	<input type="checkbox"/> 3	Go to Q18	
I am a relative, carer or friend of someone who uses a Freedom Pass and always help completing forms	<input type="checkbox"/> 4	Go to Q18	
I am a relative, carer or friend of someone who uses a Freedom Pass	<input type="checkbox"/> 5	Go to Q21	
My job involves work with Freedom Pass users in Barnet	<input type="checkbox"/> 6	Go to Q16	
I am a Barnet resident and interested in Freedom Passes for other reasons	<input type="checkbox"/> 7	Go to Q16	
Representing a voluntary/community organisation	<input type="checkbox"/> 8	Go to Q16	
Representing a public sector organisation	<input type="checkbox"/> 9	Go to Q16	
Other (please specify below)	<input type="checkbox"/> 10	Go to Q18	

#### 14. Please specify the type of stakeholders or residents your community group or voluntary organisation represents: (Please write in your answer)

#### 15. Please specify the type of public sector organisation you are representing:

(Please write in your answer)

**If you are representing a community group or voluntary organisation  
please go to the end of the questionnaire**

# Section 3: Disabled Persons Freedom Pass Users

We want to understand how the Freedom Pass process works for you and how a Freedom Pass assists you with your independence.

This means we would like to know the main use of your Freedom Pass, the way you have applied for your pass and if there is additional support or guidance the Council could offer to help with you the whole Freedom Pass process.

This will help us to understand the needs of our Disabled Persons Freedom Pass holders and their support networks.

**16. What do you use your Freedom Pass for most often?** (Please tick **one** box only)

Travelling to...	
work	<input type="checkbox"/> 1
school	<input type="checkbox"/> 2
care centre	<input type="checkbox"/> 3
social club (for example, youth club)	<input type="checkbox"/> 4
hospital, GP or other medical practice	<input type="checkbox"/> 5
visit friends or family or other social visit	<input type="checkbox"/> 6
Other (please specify below)	<input type="checkbox"/> 7

# Section 4: Disabled Persons Freedom Pass Users



We would like to know the way you would apply for or renew your Freedom Pass.

We propose to improve and expand the information and online services available on our website to try and make the process as easy for users as possible.

**17. Do you think we have missed any evidence which should be included in the eligibility for Disabled Persons Freedom Passes?** (Please tick **one** option only)

Online	<input type="checkbox"/> 1	Go to Q21	Paper	<input type="checkbox"/> 2	Other (please specify below)	<input type="checkbox"/> 3
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**18. To help us understand the feedback you give us, please tick the most appropriate box**

(Please tick **one** box only)

No access to the internet	<input type="checkbox"/> 1
No computer	<input type="checkbox"/> 2
Prefer to use paper	<input type="checkbox"/> 3
Form is hard to read online	<input type="checkbox"/> 4
Form is hard to fill out online	<input type="checkbox"/> 5
Prefer to have a copy of your documents to file	<input type="checkbox"/> 6
Require an alternative format	<input type="checkbox"/> 7
Other (please specify below)	<input type="checkbox"/> 8
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	

## Section 5: Diversity monitoring

**Barnet Council is required by law, under the Equality Act 2010, to pay due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between people from different groups.**

One way we do this is to assess the impact of our services and practices on different groups.

The information collected here will help the council to ensure that our policies and services are fair and accessible, to assess the impact of policies, services and decisions on people with the protected characteristics covered by the Act, and to demonstrate compliance with the law.

To assist us in complying with our duty under the Equality Act 2010, in this section of the survey we ask you some personal questions, which we encourage you to complete. Collecting this information helps us understand the needs of our different communities.

Please be assured that all the answers you provide will be treated in the strictest confidence and will be stored securely in an anonymous format. All information will be stored in accordance with our responsibilities under the Data Protection Act 1998.

For the purposes of this survey we are asking all nine of the protected characteristics included in the Equality Act 2010.

### 19. Are you male or female? (Please tick **one** box only)

Male	<input type="checkbox"/> 1 Go to Q23	Female	<input type="checkbox"/> 2	Prefer not to say	<input type="checkbox"/> 3 Go to Q23
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### Females only: Pregnant and on maternity leave

As part of the Equality Act 2010 the council has a statutory requirement to collect information in relation to 'protected characteristics' which includes information on women who are pregnant and on maternity leave. Answering the next question will assist us in meeting our legal obligations. It will also help us understand the different needs of our communities.

### 20. Are you pregnant and/or on maternity leave? (Please tick **one** box on each row)

	Yes	No	Prefer not to say
I am pregnant	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
I am currently on maternity leave	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

As part of the Equality Act 2010 the council has a statutory requirement to collect information and pay due regard in relation to 'protected characteristics' which includes gender re-assignment. Answering the next question will assist us in meeting our legal obligations. It will also help us understand the different needs of our communities.

## 21. Is your gender identity the same as the gender you were assigned at birth?

(Please tick **one** box only)

Yes	<input type="checkbox"/> 1	No	<input type="checkbox"/> 2	Prefer not to say	<input type="checkbox"/> 3
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## 22. What is your age group? (Please tick **one** box only)

16 – 17	<input type="checkbox"/> 1	46 – 50	<input type="checkbox"/> 7
18 – 25	<input type="checkbox"/> 2	51 – 55	<input type="checkbox"/> 8
26 – 30	<input type="checkbox"/> 3	56 – 60	<input type="checkbox"/> 9
31 – 35	<input type="checkbox"/> 4	61 and over	<input type="checkbox"/> 10
36 – 40	<input type="checkbox"/> 5	Prefer not to say	<input type="checkbox"/> 11
41 – 45	<input type="checkbox"/> 6		

## 23. What is your ethnic origin? (Please tick **one** box only)

Asian or Asian British		White	
Bangladeshi	<input type="checkbox"/> 1	British	<input type="checkbox"/> 13
Chinese	<input type="checkbox"/> 2	Greek/Greek Cypriot	<input type="checkbox"/> 14
Indian	<input type="checkbox"/> 3	Gypsy or Irish Traveller	<input type="checkbox"/> 15
Pakistani	<input type="checkbox"/> 4	Irish	<input type="checkbox"/> 16
Any other Asian background (please specify below)	<input type="checkbox"/> 5	Turkish/Turkish Cypriot	<input type="checkbox"/> 17
<input type="text"/>		Any other White background (please specify below)	<input type="checkbox"/> 18
		<input type="text"/>	
Black or Black British		Other ethnic groups	
African	<input type="checkbox"/> 6	Arab	<input type="checkbox"/> 19
Caribbean	<input type="checkbox"/> 7	Other ethnic group (please specify below)	<input type="checkbox"/> 20
Any other Black /African/Caribbean (please specify below)	<input type="checkbox"/> 8	<input type="text"/>	
<input type="text"/>		Prefer not to say	<input type="checkbox"/> 21
Mixed			
White and Asian	<input type="checkbox"/> 9		
White and Black African	<input type="checkbox"/> 10		
White and Black Caribbean	<input type="checkbox"/> 11		
Any other Mixed/Multiple ethnic background (please specify below)	<input type="checkbox"/> 12		
<input type="text"/>			

## Disability

The Equality Act 2010 defines disability as ‘a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities’.

In this definition, long- term means more than 12 months and would cover long-term illness such as cancer and HIV or mental health problems.

### 24. Do you consider that you have a disability as outlined above?

(Please tick **one** box only, if you answer ‘yes’, please select the definition(s) from the list below that best describes your disability/disabilities).

Yes	<input type="checkbox"/> 1	No	<input type="checkbox"/> 2	Prefer not to say	<input type="checkbox"/> 3 Go to Q27	
Hearing (such as deaf, partially deaf or hard of hearing)		<input type="checkbox"/> 4		Severe Disfigurement		<input type="checkbox"/> 9
Vision (such as blind or fractional/partial sight. Does not include people whose visual problems can be corrected by glasses/contact lenses)		<input type="checkbox"/> 5		Learning Difficulties (such as dyslexia)		<input type="checkbox"/> 10
Speech (such as impairments that can cause communication problems)		<input type="checkbox"/> 6		Mental Illness (substantial and lasting more than a year, such as severe depression or psychoses)		<input type="checkbox"/> 11
Mobility (such as wheelchair user, artificial lower limb(s), walking aids, rheumatism or arthritis)		<input type="checkbox"/> 7		Physical Co-ordination (such as manual dexterity, muscular control, cerebral palsy)		<input type="checkbox"/> 12
Reduced Physical Capacity (such as inability to lift, carry or otherwise move everyday objects, debilitating pain and lack of strength, breath energy or stamina, asthma, angina or diabetes)		<input type="checkbox"/> 8		Other disability (please specify below)		<input type="checkbox"/> 13
				<input type="text"/>		
				Prefer not to say		<input type="checkbox"/> 14

### 25. What is your religion or belief? (Please tick **one** box only)

Agnostic	<input type="checkbox"/> 1	Jewish	<input type="checkbox"/> 9
Atheist	<input type="checkbox"/> 2	Muslim	<input type="checkbox"/> 10
Baha'i	<input type="checkbox"/> 3	Sikh	<input type="checkbox"/> 11
Buddhist	<input type="checkbox"/> 4	No religion	<input type="checkbox"/> 12
Christian	<input type="checkbox"/> 5	Other religion/belief (please specify below)	<input type="checkbox"/> 13
Hindu	<input type="checkbox"/> 6	<input type="text"/>	
Humanist	<input type="checkbox"/> 7		
Jain	<input type="checkbox"/> 8	Prefer not to say	<input type="checkbox"/> 14

**26. What is your sexual orientation?** (Please tick **one** box only)

Bisexual	<input type="checkbox"/>	1	Lesbian	<input type="checkbox"/>	4
Gay	<input type="checkbox"/>	2	Prefer not to say	<input type="checkbox"/>	5
Heterosexual	<input type="checkbox"/>	3			

**27. In addition, if you prefer to define your sexuality in terms other than those used above, please let us know below?** (Please write in your answer)

**Thank you for taking the time to complete this survey.  
Please return in the enclosed reply paid envelope provided by 4 November 2016.**







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 you would like to take part in a working user group for further input into improvements to the Disabled Persons Freedom Pass process, please provide your details to the team by contacting us on:  
tel: 020 8359 5460 email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk)

Have your say

# Disabled Persons Freedom Pass

Consultation document

# Introduction

**Barnet Council is improving the way new applicants and existing Disabled Persons Freedom Pass holders are assessed to see if they qualify for a pass. This will mean a better quality, and more effective service for users.**

In this document we set out our proposals for a better way of assessing applications and renewals. We are proposing to accept more types of supporting evidence for each application, making the assessment process fairer for everyone.

Over the next six weeks we will be consulting with Barnet residents, service users, volunteers, community groups and voluntary organisations on these proposals.

The consultation is also available on [engage.barnet.gov.uk](https://engage.barnet.gov.uk) where feedback can be given through an online questionnaire.

We are making improvements to the:

- way we assess if someone qualifies for a Disabled Persons Freedom Pass, and
- the way that people can apply.

Our proposals include:

- more ways to provide evidence to support your application
- looking at the ways you can apply for a Disabled Persons Freedom Pass
- making documents more accessible for all users.

There are no proposed changes to the **categories** of the recognised disabilities because these categories are stipulated by government legislation.

## What do we want to achieve through these proposals?

To achieve these proposals we will:

- provide a service that is easy and simple to understand
- provide clear information for all applications
- ensure that the service is easily accessible via telephone, email and face-to-face, ensuring that each applicant is supported through the renewal/application process
- ensure applicants are fairly assessed using the evidence they provide with their application and, where applicable, an independent mobility assessment be carried out
- ensure every person who chooses to apply for a Disabled Persons Freedom Pass has access to guidance information, face-to-face assistance (if required), and document formats which are suitable for them
- introduce 'Easy Read' documents.

The review of the Disabled Persons Freedom Pass process is also to ensure:

- the process is easier to understand
- to ensure the process is efficient.

This document provides further information on Freedom Passes and our proposals, in particular:

- background information on Freedom Passes and how they are currently administered
- detailed information on what we are proposing
- an outline of the key questions we are seeking your views on.

## How to give your views

The consultation is open to all Barnet residents, anybody currently holding a Disabled Persons Freedom Pass in Barnet, their carers and families, community groups and voluntary organisations.

There are three ways you can take part in the questionnaire:

- you can complete a questionnaire online [engage.barnet.gov.uk](http://engage.barnet.gov.uk), or
- complete a paper questionnaire. If you would like a paper questionnaire please contact us by:
  - email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk)  
tel: 020 8359 5640
- attend a drop-in session (see below), where we can help you complete the questionnaire.

If you need any additional help or support, or wish to have a copy of this document in a different format, you can contact us by:  
email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk)  
tel: 020 8359 5640

The findings from the consultation will contribute to the final recommendations that are put forward to the Policy and Resources Committee in December. The committee will then make a decision on the way forward.

Details of drop-in sessions		
Location	Date	Time
Hendon Library, The Burroughs, Hendon NW4 4BQ	30 September 2016	10am – 12noon and 2 – 4pm
North Finchley Library, Ravensdale Avenue, North Finchley N12 9HP	3 October 2016	10am – 12noon and 2 – 4pm
Chipping Barnet Library, 3 Stapylton Road, Chipping Barnet EN5 4QT	11 October 2016	10am – 12noon and 2 – 4pm
Burnt Oak Library, Watling Avenue, Edgware HA8 0UB	19 October 2016	10am – 12noon and 2 – 4pm
Golders Green Library, 156 Golders Green Road, Golders Green NW11 8HE	27 October 2016	10am – 12noon and 2 – 4pm
Edgware Library, Hale Lane, Edgware HA8 8NN	3 November 2016	10am – 12noon and 2 – 4pm

# Background

## What are Freedom Passes?

Freedom Pass is a brand name in London for the concessionary travel scheme which allows free travel on buses, Tube, and some rail services. It grants free transport for disabled residents at any time on almost all Tube and bus services, and after 9.30am weekdays on rail services. It is a statutory scheme which is operated by London Councils on behalf of London Boroughs including Barnet.

The Freedom Pass is a plastic card which works in the same way as an Oyster card or contactless payment card where a user taps in and taps out of transport services.



London Councils manages the Freedom Pass scheme. Once an applicant has proved their eligibility London Councils will be advised. London Councils will then arrange for the Freedom Pass to be posted out to the address supplied on the application form.

## What are the different types of Freedom Passes available?

There are two types of Freedom Passes:

### Older Persons Freedom Pass

The Older Persons Freedom Pass Scheme allows older people to travel free across London and free national bus journeys.

To obtain an Older Persons Freedom pass, you must meet the following eligibility criteria:

**‘Your London home needs to be your ‘sole’ or ‘principal’ residence, which means you live there most of the time. The eligibility age is rising in line with the women’s state pension age. People born on or after 6 October 1954 will have to wait until they are 66 years old to be eligible for a Freedom Pass.’**

The changes we are proposing will not affect the Older Person’s Freedom Pass criteria.

### Disabled Persons Freedom Pass

The Disabled Persons Freedom Pass Scheme is administered by London Councils, however all checking and processing is carried out by the local authority.

## How does an applicant prove they qualify for a Disabled Persons Freedom Pass?

An applicant must provide supporting evidence with their application form. The evidence which should be provided by the applicant and accepted by the council is detailed in the Department for Transport guidance ‘Guidance to local authorities on assessing eligibility of disabled people in England for concessionary bus travel’.

Further information and the full Department for Transport guidance can be found below:

[www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/181507/eligibility-review.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/181507/eligibility-review.pdf)

Currently, Disabled Persons Freedom Pass applicants will undergo a desk-based assessment by a council officer to determine whether the applicant falls under one of the automatic eligibility categories and has provided acceptable supporting evidence and can be issued a pass.

Barnet Council uses guidelines known as ‘assessment of eligibility’ to establish if someone qualifies for a Disabled Persons Freedom Pass.

To be eligible for a Disabled Persons Freedom Pass:

**‘Your sole or principal residence must be in London; and you must have one of the recognised disabilities from Section 240 of the Greater London Authority Act 1999 (as amended).’**

The recognised disabilities according to s240 Greater London Authority Act 1999 (as amended) which make someone eligible for a Disabled Persons Freedom Pass are, people who:

1. are blind or partially sighted
2. are profoundly or severely deaf
3. are without speech
4. have a disability, or have suffered an injury, which has left them with a substantial and long-term adverse effect on their ability to walk
5. do not have arms or have a long-term loss of the use of both arms
6. have a learning disability that is defined as ‘a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning’
7. if they applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, would have their application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol.

Starting on page 6 of this document we have included a table which explains the current criteria and proposed criteria. This information is also provided within the online questionnaire so you can refer to the changes as you answer each question about the changes to the evidence.

## What feedback do we want from you?

We are seeking your views on:

- what extent you support or oppose the proposed changes to the evidence which will be accepted to support an application for a Disabled Persons Freedom Pass
- whether there is other evidence the council should accept
- how you would prefer to send evidence
- the application process and what help you would need to complete a form
- what support could be provided to help you complete a form online.

We are also asking current Disability Freedom Pass Users:

- how you currently apply for a pass
- what is your main use of the pass, for example, socialising, education or work?

## Additional information

Further information and the full legislation of s240 Greater London Authority Act can be found below:

Section 240 Greater London Authority Act: [www.legislation.gov.uk/ukpga/1999/29/section/240](http://www.legislation.gov.uk/ukpga/1999/29/section/240)

Department for Transport ‘Guidance to local authorities on assessing eligibility of disabled people in England for concessionary bus travel’: [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/181507/eligibility-review.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/181507/eligibility-review.pdf)

DVLA guidelines on medical fitness: [www.gov.uk/government/publications/assessing-fitness-to-drive-a-guide-for-medical-professionals](http://www.gov.uk/government/publications/assessing-fitness-to-drive-a-guide-for-medical-professionals)

# The current required evidence and the proposed evidence

Assessment of eligibility for Disabled Persons Freedom Pass – London Borough of Barnet		
Category	Current evidence accepted of stated disability	Proposed evidence accepted of stated disability
Is blind or partially sighted	Provide London Borough of Barnet (LBB) registration number	A Certificate of Visual Impairment (CVI) ; or A BD8 Certificate; or A London Borough of Barnet (LBB) Social Care Direct registration number
Is profoundly or severely deaf	Provide London Borough of Barnet (LBB) registration number	A recent Audiogram or an Audiology Report which states a severe hearing loss of 70-95 dB HL (Hearing Level) and a profound loss of 95+ dB HL; or Provide London Borough of Barnet Social Care Direct registration number
Is without speech	Provide London Borough of Barnet (LBB) registration number	Recent Personal Independence Payment (PIP) award letter stating an award of eight points or more for 'Communicating Verbally'; or Recent Medical Evidence from a Speech Therapist
Has suffered an injury, which has a substantial and long term adverse effect on your ability to walk	Receives Personal Independence Payment (PIP)/ Higher Rate Mobility Component of Disability Living Allowance (HRMCDLA); or War Pensioners Mobility Supplement (WPMS); or Independent Medical Assessment (if Desk Based Assessment returns a score of 8-9 points)	Recent Personal Independence Payment (PIP) award letter stating an award of eight points or more for the 'Moving Around' category; or Recent Higher Rate Mobility Component of Disability Living Allowance (HRMCDLA) award letter; or Recent War Pensioners Mobility Supplement (WPMS) award letter; or Mobility assessment by LBB's Independent Medical Assessor (if Desk Based Assessment returns a score of 8-9 points)
Do not have arms, or have long term loss of both arms	Medical Evidence from GP	Medical Evidence demonstrating: <ul style="list-style-type: none"> <li>• Loss of both arms or</li> <li>• Impairment resulting in loss of use of both arms or</li> <li>• Deformity of both arms resulting in being unable to carry out day-to-day tasks</li> </ul>
Has a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning	Registered with Barnet Learning Disabilities Team	Provide proof of accepted registration with the Barnet Learning Disabilities Services (BLDS); or Receiving Services from BLDS; or Recent Clinical Psychological/Psychiatrist Assessment Report; or Current Educational Health Care Plan (EHCP) with relevant assessment/Education statement; or Receiving benefits relating to their disability

Assessment of eligibility for Disabled Persons Freedom Pass – London Borough of Barnet		
Category	Current evidence accepted of stated disability	Proposed evidence accepted of stated disability
<p>Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol.</p>	<p>Registered with Dennis Scott Unit for two years or more and must be seen regularly</p>	<p>Refusal or revocation letter from DVLA; or</p> <p>Recent Medical evidence of:</p> <ul style="list-style-type: none"> <li>• Epilepsy or</li> <li>• Severe mental disorder or</li> <li>• Sudden attacks of fainting or</li> <li>• Inability to read a registration plate at 20.5 metres even with lenses or</li> <li>• Other disabilities which are likely to cause the driving of vehicles by them to be a source of danger to the public ; or</li> </ul> <p>‘Supporting Information Request Form’ completed by a specialist; or</p> <p>Evidence of contact with mental health professional in relationship to a mental health diagnosis which has a significant impact on their wellbeing; or</p> <p>Subject to Current Mental Health Care Programme Approach; or</p> <p>Evidence of receiving benefits such as DLA OR PIP relating to their disability</p>

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For more information:  
tel: 020 8359 5460 email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk)  
or visit [engage.barnet.gov.uk](http://engage.barnet.gov.uk)

**Disabled Persons Freedom Pass  
Consultation 2016**

**Final Consultation Report**

**26 September 2016 – 4 November 2016  
Consultation**



## **SECTION 1**

# **Executive Summary**

## 1. EXECUTIVE SUMMARY

This report sets out the final consultation findings from the formal Disabled Persons Freedom Pass Consultation 2016 which will be presented to Policy and Resources Committee on 1 December 2016.

## 2. Disabled Persons Freedom Pass Review

The council undertook a review of the Disabled Persons Freedom Pass process with internal stakeholders via the working group and some partner groups during summer 2016. The findings of this review were presented to Policy and Resources Committee on 1 September 2016 prior to the full consultation.

A full report on the findings of the first phase of the review can be found in the report, available here: <https://barnet.moderngov.co.uk/documents/s34156/Report.pdf>

### 2.1 Summary of review

The aim was to review the Disabled Persons Freedom Pass assessment process and assessment criteria to date (August 2016). Recommendations were also made regarding a new draft Disabled Persons Freedom Pass process and assessment criteria for Committee to consider which was approved at Committee on 1 September 2016. These recommendations were revised with reference to processes of other London boroughs and to ensure that the Council is adhering to section 240 of the Greater London Authority Act 1999 as amended by section 151 of the Transport Act 2000, Department for Transport Guidance and is promoting the principles of the Care Act 2015 as part of its process.

One of the outcomes from the review was the methods of assessment for the new criteria which has widened the forms of evidence the council will accept. On 1 September 2016 this was approved by Committee and to be taken to consultation.

### 2.2 Disabled Persons Freedom Pass Consultation

This consultation and engagement is to inform the council's development of the application and renewal process for Disabled Persons Freedom Passes.

The council is making improvements to the way that we:

- assess if someone qualifies for a Disabled Persons Freedom Pass, and
- the way that people can apply for a Disabled Persons Freedom Pass.

Our proposals include:

- more ways to provide evidence to support your application
- looking at the ways you can apply for a Disabled Persons Freedom Pass and
- making documents more accessible for all users.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

The consultation asked residents to what extent they support or oppose the types of evidence the council will accept for each of the seven categories of disabilities recognised by the by the s240 of the Greater London Authority Act (as amended).

Additional questions were asked surrounding the way individuals apply for or renew their pass to highlight the main methods used and what support can be provided when the new process is implemented.

### 2.2.1 Summary of method

The general consultation consisted of an online questionnaire published on <http://engage.barnet.gov.uk> together with a consultation document which provided detailed background information about the Council's proposals and include additional information on Disabled Persons Freedom Passes. Paper copies, easy read and large print versions of the consultation were also made available on request.

Letters were sent out to all 8,158 Disabled Persons Freedom Pass holders to invite them to take part in the consultation, or attend a library drop-in session to discuss the proposals and seek assistance in completing the questionnaire.

The consultation team engaged with the organisations and groups listed in Table 1 below. This was carried out by attending prearranged group meetings and other meetings with key organisers.

**Table 1: List of organisations and groups engaged with during the consultation**

Name of Organisation	Date
Mental Health AGM	31/10/2016
Barnet Asian Elders Association	13/10/2016
Mencap	10/10/2016
Met Police	10/10/2016
Age UK	06/10/2016
Barnet African Caribbean Association	20/09/2016
Barnet Older Asian Association	20/09/2016
Barnet Voice for Mental Health	20/09/2016
Barnet People's Choice	20/09/2016
Space 2 B	28/10/2016
Barnet Voice for Mental Health AGM	31/10/2016
Volunteering Matters	02/11/2016
Learning Disability Parliament	03/11/2016
Inclusion Barnet	11/10/2016
Community Barnet	19/09/2016

The consultation was promoted via local media, social networks and posters were distributed to voluntary organisations, Housing Estates, Police Stations, Libraries and prominent London Borough of Barnet Buildings and various daycentres.

Disabled Persons

# Freedom Pass Consultation

From Monday 26 September to 4 November 2016

This is your opportunity to give us your views on:

- the way we assess if someone qualifies for a Disabled Persons Freedom Pass
- the way that people can apply for a Disabled Persons Freedom Pass.

Give us your views by:

1. Attending a drop-in session

Hendon Library	30 September 2016	10am – 12noon and 2 – 4pm
North Finchley Library	3 October 2016	10am – 12noon and 2 – 4pm
Chipping Barnet Library	11 October 2016	10am – 12noon and 2 – 4pm
Burnt Oak Library	19 October 2016	10am – 12noon and 2 – 4pm
Golders Green Library	27 October 2016	10am – 12noon and 2 – 4pm
Edgware Library	3 November 2016	10am – 12noon and 2 – 4pm

2. Complete a short online survey at [engage.barnet.gov.uk](http://engage.barnet.gov.uk)

If you would like a paper copy of the information and questionnaire you can email: [fpfeedback@barnet.gov.uk](mailto:fpfeedback@barnet.gov.uk) or call 020 8359 5460  
For more information and to take part in the consultation visit:  
[engage.barnet.gov.uk](http://engage.barnet.gov.uk)

## 2.2.2 Response to the consultation

A total of 376 questionnaires have been completed; 238 of respondents advised they currently hold a Disabled Persons Freedom Pass.

Of those who did complete the diversity monitoring questions, younger residents are underrepresented and older residents are significantly over represented. There is also a significant over representation of White respondents and a significant under representation of Black, Mixed and Asian respondents.

During face-to-face engagement at library sessions, some respondents did not wish to complete every question and opted to only complete questions which related to their disability. When respondents were asked some did not feel they knew enough about the category and some did not wish to answer.

## 3. Summary of key findings and reasons given

Overall, 53 per cent of respondents supported the changes to the evidence suggested to be accepted by the council for each of the seven categories of disabilities.

8,158 pass holders were written to individually inviting them to take part in the consultation, 238 Disabled Persons Freedom Pass users responded to the consultation.

Of the total 8,158 pass holders, 194 letters were returned to sender and classed as 'Not known at this address' and 1358 pass holders are in the process of being transferred to the Older Persons Freedom Pass.

34% of residents feel that the proposed changes will have a positive impact whilst 42% stated that it would have no impact/not applicable. 24% stated that the proposals would have a negative impact.

Those who were more likely to support the changes were male, aged 56-60, white and has a disability related to mobility.

### 3.1 Council's proposal to change the acceptable evidence of eligibility for Disabled Persons Freedom Pass for each category of disability

The consultation asked residents to what extent they support or oppose the types of evidence the council will accept for each of the seven categories of disabilities recognised by the by the s240 of the Greater London Authority Act (as amended).

For some questions, a significant percentage of respondents answered don't know or not applicable.

#### 3.1.1 Summary of stakeholders

Table 2 over the page shows the majority of respondents are Disabled Persons Freedom Pass users. Therefore the results are indicative of the views of Disabled Persons Freedom Pass users.

**Table 2: Sample Profile**

Stakeholder	Number	%
Disabled Persons Freedom Pass holder	238	80%
Older Persons Freedom Pass holder	12	4%
Resident interested in applying for a Freedom Pass	5	2%
Relative of a Disabled Persons Freedom Pass holder	19	6%
Job involves work with Freedom Pass users in Barnet	7	2%
Barnet residents interested in Disabled Persons Freedom Pass	5	2%
Voluntary/community organisation	7	2%
Public sector organisation	4	1%
Other	2	1%
Total	299	100%

### 3.1.2 Category a: is blind or partially sighted

**To what extent do you support or oppose the proposed changes for this category?**

- 47 per cent of respondents said they supported the proposed changes with 14 per cent opposing. 18 per cent neither support nor oppose and 21 per cent answered don't know or not applicable.
- 5 per cent of comments mentioned 'Evidence: GP letter should be accepted'.
- 64 per cent of respondents gave no reason for their answer.

### 3.1.3 Category b: is profoundly or severely deaf

**To what extent do you support or oppose the proposed changes for this category?**

- 48 per cent of respondents said they supported the proposed changes with 14 per cent opposing. 17 per cent neither support nor oppose and 21 per cent answered don't know or not applicable.
- 5 per cent of comments mentioned 'Evidence: GP letter should be accepted'.
- 70 per cent of respondents gave no reason for their answer.

### 3.1.4 Category c: is without speech

**To what extent do you support or oppose the proposed changes for this category?**

- 47 per cent of respondents said they supported the proposed changes with 15 per cent opposing. 18 per cent neither support nor oppose and 20 per cent answered don't know or not applicable.
- 4 per cent of comments mentioned 'Evidence: GP letter should be accepted'.
- 71 per cent of respondents gave no reason for their answer.

### **3.1.5 Category d: has a disability, or has suffered an injury, which has a substantial and long-term adverse effect on his ability to walk**

**To what extent do you support or oppose the proposed changes for this category?**

- 56 per cent of respondents said they supported the proposed changes with 17 per cent opposing. 15 per cent neither support nor oppose and 12 per cent answered don't know or not applicable.
- 5 per cent of comments mentioned 'Evidence: GP letter should be accepted'.
- 65 per cent of respondents gave no reason for their answer.

### **3.1.6 Category e: does not have arms, or have long term loss of both arms**

**To what extent do you support or oppose the proposed changes for this category?**

- 54 per cent of respondents said they supported the proposed changes with 14 per cent opposing. 14 per cent neither support nor oppose and 19 per cent answered don't know or not applicable.
- 6 per cent of comments related to 'No other evidence required / Agree with suggestions'.
- 75 per cent of respondents gave no reason for their answer.

### **3.1.7 Category f: has a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning**

**To what extent do you support or oppose the proposed changes for this category?**

- 59 per cent of respondents said they supported the proposed changes with 14 per cent opposing. 13 per cent neither support nor oppose and 14 per cent answered don't know or not applicable.
- 3 per cent of comments mentioned 'Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict / More flexibility required'.

- 69% of respondents gave no reason for their answer.

### 3.1.8 Category g: would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol.

**To what extent do you support or oppose the proposed changes for this category?**

- 61 per cent of respondents said they supported the proposed changes with 8 per cent opposing. 14 per cent neither support nor oppose and 18 per cent answered don't know or not applicable.
- 4 per cent of comments mentioned 'Approve of proposals / Approve widening of evidence/ Good to have a choice'.
- 73 per cent of respondents gave no reason for their answer.

## 4. Disabled Persons Freedom Pass additional questions

### 4.1 Missed evidence

Respondents were also asked whether they believed any evidence had been missed from the accepted evidence presented with each question and available in the accompanying consultation document.

**Do you think we have missed any evidence which should be included in proving the eligibility for Disabled Persons Freedom Passes?**

- 39 per cent of respondents did not think any other evidence had been missed.
- Of those who did believe evidence had been missed, 18 per cent of comments related to 'Evidence: GP Letter should be accepted' and 18 per cent of comments mentioned 'Mental Health should be taken more into account / Autism should be taken into account'.
- 24 per cent of respondents thought evidence had been missed. Further explanation of the types of evidence which is suggested to have been missed is discussed in section 2.
- 37 per cent of respondents stated they did not know or were not sure if evidence has been missed.

## 4.2 Impact of the changes on respondents lives

**Do you think the proposed changes will have a positive or negative impact on your life?**

- 34 per cent of respondents stated that the proposals would have a positive impact to their lives. 27 per cent stated that the proposals would have no impact and 24 per cent felt that the proposals would have a negative impact. 15 per cent of respondents answered don't know or not applicable.
- Of those, who think it will have a negative impact on their lives the most common reason (42 per cent) was concern of losing independence / Freedom Pass / Unable to attend groups, work, college.
- 32 per cent of respondents gave no reason for their answer for the proposals impacting negatively on their lives.

## 4.3 Questions on the Freedom Pass process and methods

Respondents were asked the following questions on the way someone applies or renews their Disabled Persons Freedom Pass:

### 4.3.1 How would you prefer to submit evidence to the council of your recognized disability?

- 41 per cent of the respondents would prefer to submit evidence by post.
- 26 per cent would prefer to submit evidence online.
- 13 per cent would prefer to submit by email.
- 9 per cent stated they did not know or were not sure.
- 2 per cent would never apply for a pass.
- 4 per cent included various comments providing additional options to be considered. Further detail on these comments can be found in section 2.

### 4.3.2 If you needed help to complete a form, who would help you?

- 52 per cent would get help to complete a form from their families.
- 18 per cent would get help to complete a form from their friends.
- 14 per cent would get help to complete a form from their carer.
- 14 per cent would get help to complete a form from would not need help.
- 12 per cent would get help to complete a form from a third sector organisation or voluntary organisation.

- 9 per cent would get help from Citizens Advice Bureau.
- 7 per cent did not know or were not sure.
- 6 per cent would get help from a neighbour.
- 3 per cent would get help from their school, college or employer.

Further information on additional channels of support can be found in section 2.

### 4.3.3 At the moment, how much support would you need to complete an online form through the council website?

- 64 per cent of respondents would require varying levels of support.
- 26 per cent of respondents would require no support.
- 7 per cent did not know or were not sure and 3 per cent answered not applicable.

### 4.3.4 What do you use your Disabled Persons Freedom Pass for most often?

- 47 per cent of respondents use their pass to go to the Hospital, GP or other medical practice.
- 26 per cent use their pass for social visits to friends, family etc.

### 4.3.5 Which method do you currently use when applying/renewing your Freedom Pass?

- 57 per cent of respondents use paper to apply for or renew their Freedom Pass.
- 34 per cent of respondents apply online.
- 3 per cent receive an automatic renewal of their Freedom Pass.

### 4.3.6 Why do you not use the online method?

- 30 per cent of respondents prefer to use paper when applying/renewing their Freedom Pass.
- 12 per cent prefer to have a copy of their documents.
- 12 per cent require an alternative format.
- 10 per cent have not got a computer.



## **SECTION 2**

# **Disabled Persons Freedom Pass Consultation**

**2016**

## **Detailed Findings**

## 1. BACKGROUND

This report sets out the full findings from the council's consultation on Disabled Persons Freedom Passes. The findings will be considered at Policy and Resources committee on 1 December 2016, where it will be decided whether to approve and commence onto the next stage.

In terms of service specific consultations the council has a duty to consult with service users where there are proposals to vary, reduce or withdraw services.

Table 1 outlines the phases of consultation and engagement to date:

**Table 1: Consultation and engagement**

Phase	Date	Summary
Review of existing process	<i>Summer 2016</i>	The council undertook a full review of the Disabled Persons Freedom Pass process and engaged with internal stakeholders via the working groups and some partners
Consultation to inform development of options	<i>September 2016 – November 2016</i>	<ul style="list-style-type: none"> <li>• Engagement through library drop-in sessions</li> <li>• Meetings and presentations with stakeholders, third sector organisations and service users</li> <li>• Open engagement asking residents to feedback ideas on the future of Disabled Persons Freedom Passes in Barnet.</li> </ul>
Workshops	<i>Winter 2016/2017</i>	<ul style="list-style-type: none"> <li>• Data Cleansing</li> <li>• Data Matching</li> <li>• Application Forms</li> <li>• Website information and functionality</li> <li>• Communication Templates</li> <li>• Renewals</li> <li>• Accessibility</li> <li>• Diversity</li> <li>• Telephone Communication</li> <li>• Re-designing applicant journeys end-to-</li> <li>• Appeals Process</li> <li>• Automatic renewals</li> <li>• Desk based assessments</li> </ul>

## 2. Disabled Persons Freedom Pass Review

The council undertook a review of the existing processes of Disabled Persons Freedom Pass.

The aim was to review the Disabled Persons Freedom Pass assessment process and assessment criteria to date (August 2016). Recommendations were also made regarding a new draft Disabled Persons Freedom Pass process and assessment criteria

for Committee to consider which was approved at Committee on 1 September 2016.

These recommendations were revised with reference to processes of other London boroughs and to ensure that the Council is adhering to section 240 of the Greater London Authority Act 1999 as amended by section 151 of the Transport Act 2000, Department for Transport Guidance and is promoting the principles of the Care Act 2015 as part of its process.

One of the outcomes from the review was the methods of assessment for the new criteria which has widened the forms of evidence the council will accept. On 1 September 2016 this was approved by Committee and to be taken to consultation.

### 3. Disabled Persons Freedom Pass Consultation

Following completion of the initial review and approval to commence to the consultation phase, a six week consultation began on 26 September 2016 and concluded on 4 November 2016.

The consultation aimed to:

- obtain residents views on evidence which should be accepted to support applications and renewals
- engage with users to understand their experience of the process
- focus on how the council will assess whether someone qualifies for a Disabled Persons Freedom Pass.

#### 3.1 Technical details and method

In summary, the consultation was administered as follows:

- The Disabled Persons Freedom Pass Consultation was open for six weeks, from the 26 September 2016 to 4 November 2016.
- The consultation was published on Engage Barnet <http://engage.barnet.gov.uk> together with a consultation document which provided detailed background information about the council's proposals and include additional information on Disabled Persons Freedom Passes.
- Respondent's views were gathered via an online survey. Paper copies and an easy read version of the consultation were also made available on request.
- Letters were sent out to all Disabled Persons Freedom Pass holders to invite them to take part in the consultation, or attend a library drop-in session to discuss the proposals and seek assistance in completing the questionnaire.

- The consultation was widely promoted via the council's website; local press; Twitter; Facebook; Area Forums; and posters in libraries, police stations and other public places.
- Users were also invited to take part in the consultation through Barnet Asian, Elders Association, Mencap, Met Police, Age UK, Barnet African Caribbean Association, Barnet Older Asian Association, Barnet Voice for Mental Health, Barnet People's Choice, Space 2 B, Barnet Voice for Mental Health, Volunteering Matters, Learning Disability Parliament.
- A dedicated telephone line and email address was available for residents to contact if they needed any help, support or advice.

### 3.2 Questionnaire design

The questionnaire was developed to ascertain residents' views on the types of evidence accepted by the council to prove whether someone qualifies for a Disabled Persons Freedom Pass. In particular the consultation invited views on the:

- overall changes to evidence of proof of eligibility
- additional evidence which should be included as proof of eligibility
- ways in which someone applies/renews their pass.

In order to enable further understanding and in-depth analysis the questionnaire also included:

- open ended questions, where respondents were invited to write in any comments on the changes to evidence proposed and why they support or oppose the proposals
- open ended questions on the impact the changes may have, where residents were invited to give reasons for their answer
- key demographic questions to help understand the views of different demographic groups.

Throughout the questionnaire and where applicable hyperlinks were provided to the relevant sections of the consultation document and legislation. Those respondents who elected to receive a paper copy were also sent the consultation document.

### 3.3 Response to the consultation

As part of the consultation all 8,158 Disabled Persons Freedom Pass holders were invited to take part in the consultation by individual letter, the results show 238 respondents were Disabled Persons Freedom Pass holders.

A total of 376 questionnaires have been completed, 6 respondents were representing an organisation and 83 residents submitted a paper questionnaire.

299 respondents completed the stakeholder questions, 80 per cent of the respondents were Disabled Persons Freedom Pass holders.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

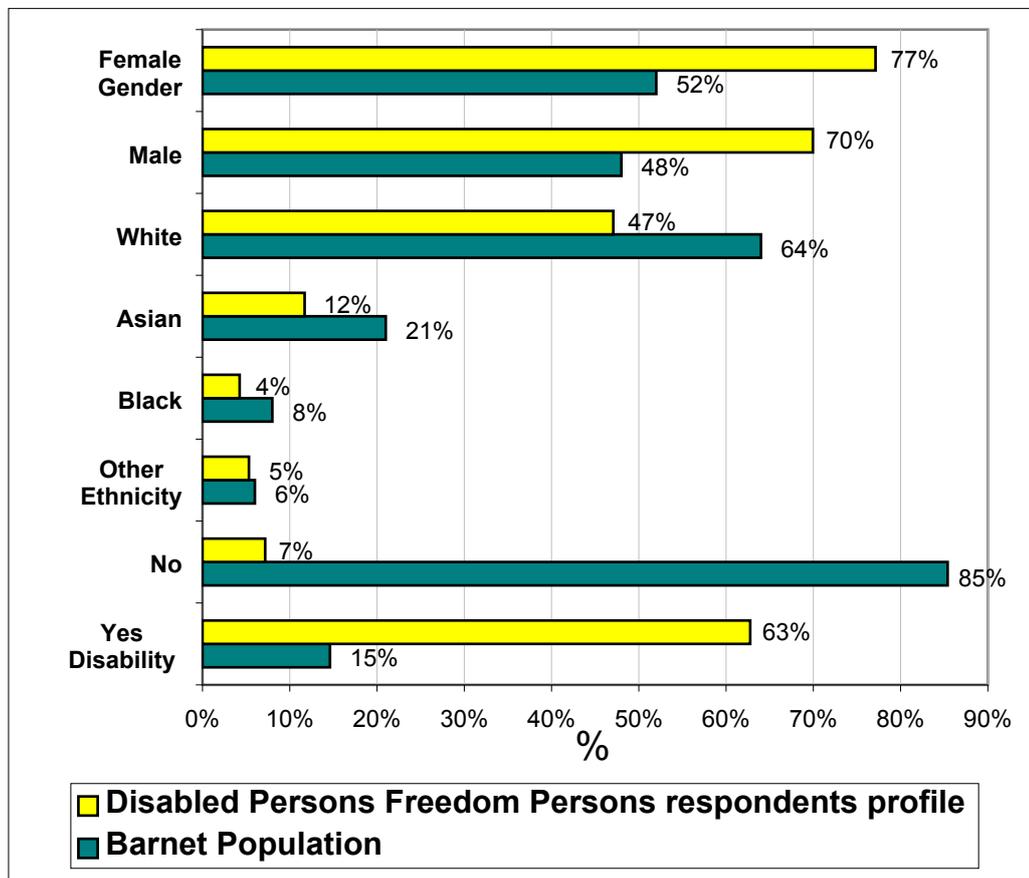
Table 2 below show the categories of stakeholders and Chart 1 below shows the profile of those who responded to the consultation.

**Table 2: Sample Profile**

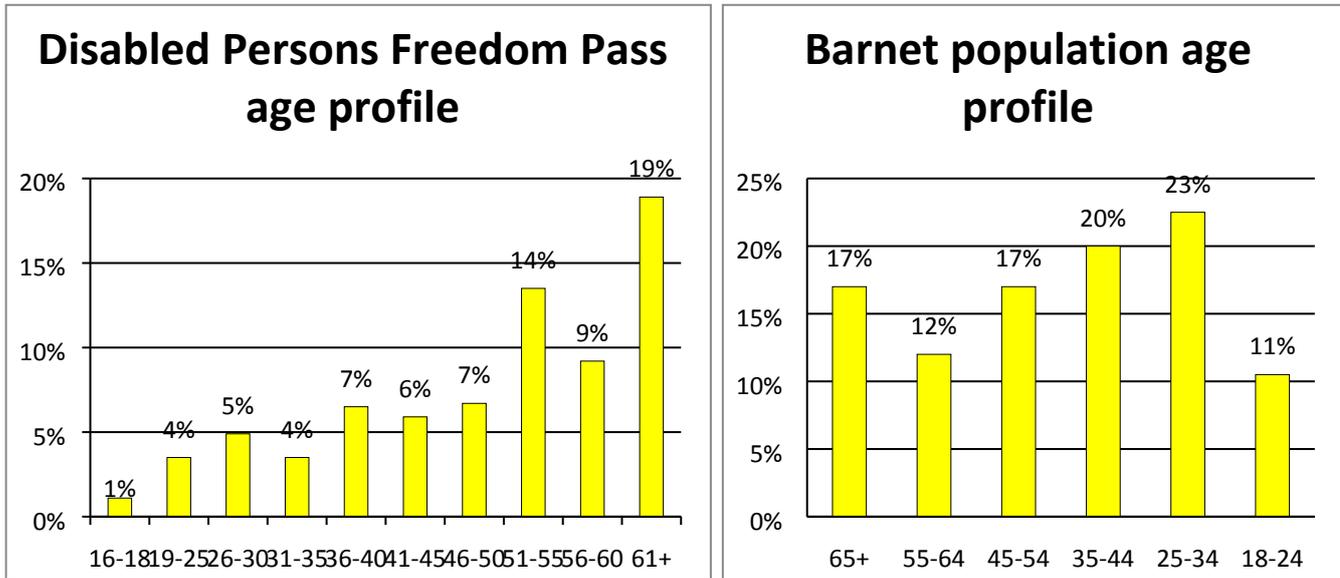
Stakeholder	Number	%
Disabled Persons Freedom Pass holder	238	80%
Older Persons Freedom Pass holder	12	4%
Resident interested in applying for a Freedom Pass	5	2%
Relative of a Disabled Persons Freedom Pass holder	19	6%
Job involves work with Freedom Pass users in Barnet	7	2%
Barnet residents interested in Disabled Persons Freedom Pass	5	2%
Voluntary/community organisation	7	2%
Public sector organisation	4	1%
Other	2	1%
Total	299	100%

The chart below shows the demographic profile of those who responded. 8,158 pass holders were invited to take part in the consultation as well as the consultation being open to all residents.

**Chart 1: Sample profile – key demographics**



**Chart 2 and 3: Age profile of respondents and Barnet population**



**3.4 Protected Characteristics**

The council is required by law, Equality Act 2010, to pay due regard to equalities in eliminating unlawful discrimination, advancing equality of opportunity and fostering good relations between people from different groups.

The protected characteristics identified in the Equality Act 2010 are age, disability, ethnicity, gender, gender reassignment, marriage and civil partnership, pregnancy, maternity, religion or belief and sexual orientation.

To assist us in complying with the duty under the Equality Act 2010 we asked the general public consultation respondents to provide equalities monitoring data and explained that collecting this information will help us understand the needs of our different communities and that all the personal information provided will be treated in the strictest confidence and will be stored securely in accordance with our responsibilities under the Data Protection Act 1998.

**Table 3: Protected Characteristic – faith and sexuality**

Protected Characteristic	Respondents	
	Number	%
Faith		
Agnostic	8	3%
Atheist	10	4%
Baha'i	0	0%
Buddhist	3	1%
Christian	92	39%
Hindu	13	6%

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Protected Characteristic	Respondents	
	Number	%
Humanist	1	0%
Jain	1	0%
Jewish	23	10%
Muslim	17	7%
Sikh	0	0%
No religion	28	12%
Prefer not to say	25	11%
Other	6	3%
Not answered	9	4%
Total	236	
<b>Sexuality</b>		
Bisexual	12	3%
Gay man	3	1%
Heterosexual	186	50%
Lesbian	2	1%
Other	12	3%
Prefer not to say	51	14%
Prefer to define your sexuality in other terms	0	0%
Not answered	105	28%
Total	371	

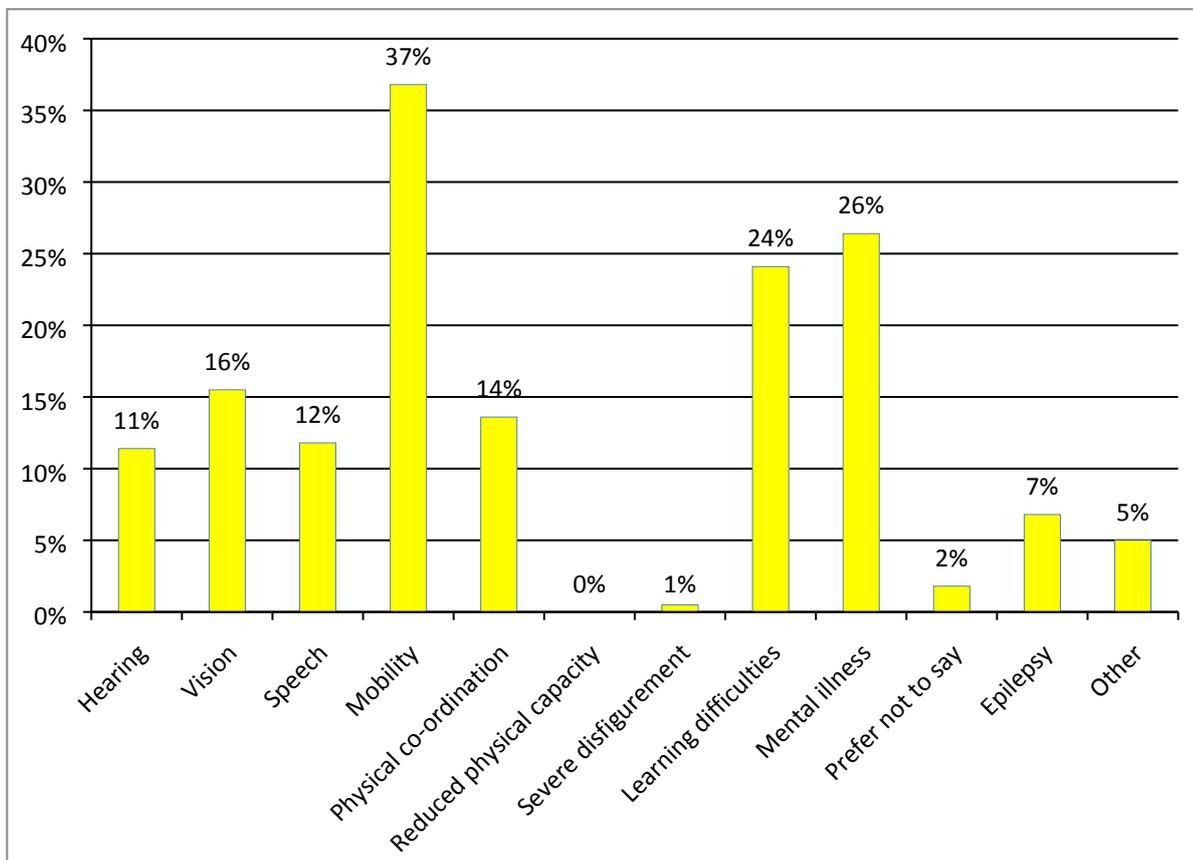
**Table 4: Protected Characteristic – gender and pregnancy**

Protected Characteristic	Respondents	
	Number	%
<b>Is your gender the same as that assigned at birth</b>		
yes	263	71%
no	4	1%
prefer not to say	12	3%
not answered	92	25%
Total	376	
<b>Pregnancy</b>		
Pregnant	1	1%
on maternity leave	0	0%
prefer not to say	4	2%
Not answered	12	8%
Total	142	

Table 3 and 4 show the results for the protected characteristics of the respondents.

Analysis of respondents sub groups and pass holder's responses showed no significant trends.

**Chart 4: Nature of disability of respondents**



- The chart above shows 37 per cent (81 out of 236) of respondents have a disability relating to mobility.
- A further breakdown of other disabilities provided by respondents can be found in section 2.

### 3.5 Interpretation of the results

In terms of the results, it is also important to note the following:

- The general public consultation is not representative of the overall population of Barnet but provides considerable information, in particular on the opinion of those residents who are more engaged with the council. However it should be treated with caution as a guide to overall opinion because its response profile does not match the Barnet population.
- Where percentages do not add up to 100, this may be due to rounding, or the question is multi coded. All open ended questions that invite respondents to write in comments, are multi-coded and therefore add up to more than 100 per cent.
- All open-ended responses to the public consultation have been classified based on the main themes arising from the comment, so that they can be summarised.

**3.6 Calculating and reporting on results**

The results for each question are based on “valid responses”, i.e. all those providing an answer (this may or may not be the same as the total sample) unless otherwise specified. The base size may therefore vary from question to question.

**4 Results in detail**

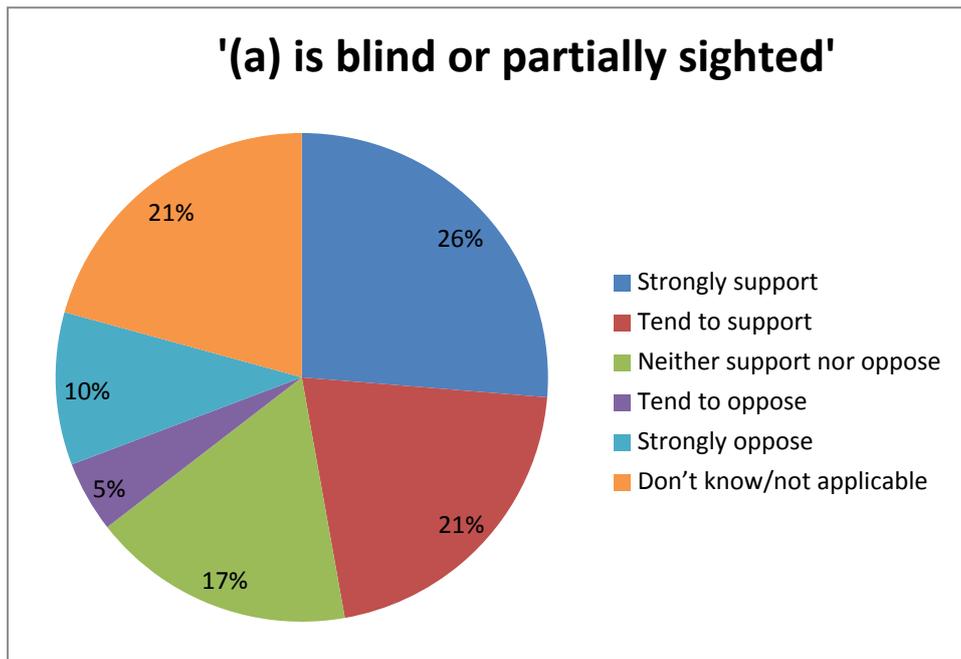
**4.1 Disability category results**

Respondents were asked if they agree with the council’s proposals to change the types of evidence required for a person under each of the seven recognised categories of disabilities.

A question was asked on each of the seven categories of recognised disabilities to determine whether the respondents agreed with the new assessment criteria.

**4.1.2 Category a: is blind or partially sighted**

**Chart 5: Results for category a**



**Table 5: Questionnaire results for category a**

<b>To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?</b>		
	<b>%</b>	<b>Base</b>
Strongly support	26%	93
Tend to support	21%	75
Neither support nor oppose	17%	62
Tend to oppose	5%	17

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Strongly oppose	10%	34
Don't know/not applicable	21%	74
Total	100%	355

- The table above shows that 47 per cent (168 out of 355) of the respondents support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 15 per cent of those responding to the general public consultation disagree with the council's proposal. 18 per cent neither support nor oppose and 21 per cent answered don't know or not applicable.

Respondents were also asked to provide reasons for their answers which are shown below in Table 6.

**Table 6: Comments given for the respondents answer**

Reasons for answer given		
	%	Base
		355
No reason given	64%	228
Evidence: GP Letter should be accepted	5%	19
Approve of proposals / Approve widening of evidence/ Good to have a choice	5%	17
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	5%	16
Comment not applicable to question category	4%	15
Ensures the system is not abused / Provides proof	3%	12
This evidence is easy to obtain / People already have this information/ Simpler for people	3%	9
People need this aid / Enables them to use public transport/ Allows independence	2%	7
Not applicable - Do not have this impairment	2%	7
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	2%	6
For conditions which are unlikely to change over time this should only be required to be submitted once	1%	5
Do not know what these things are / What is a Barnet Social Care Direct registration number/ How do you get one/ How do you apply	1%	5
Evidence: Listen to, trust the person/ Registration should not be required / Not everyone wants to 'register' and/or receive benefits	1%	4

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

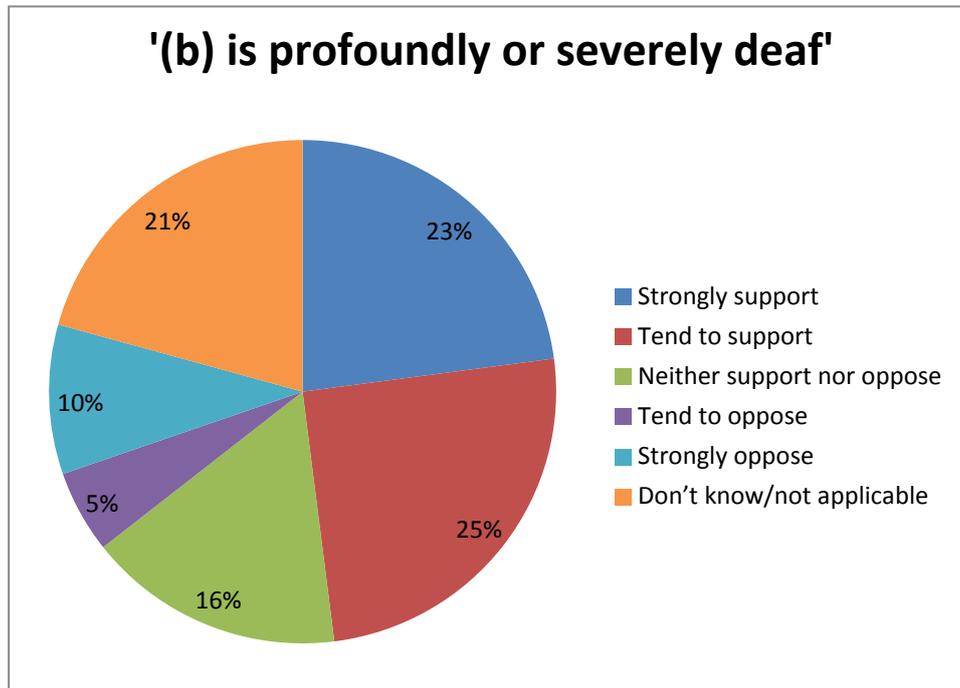
Reasons for answer given		
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	1%	4
Process needs to be simple for people with disabilities and impairments/ Should not be too much to read/ Should offer users assistance	1%	3
Too much bureaucracy/ Waste of money / Another stress on the service	1%	3
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	1%	3
Avoid causing stress to people / Don't make life difficult for disabled people.	1%	3
This widens the category of people who can get a Freedom Pass / I could now get a Pass	1%	2
Evidence: Social Services should provide council with CVI directly / Council issues BDB so already has the information	1%	2
A physical test alone is not satisfactory - people with some disability often have other non-physical issues/ PIP tests are not always fair - cannot be relied on	1%	2
Evidence: No other evidence required / Agree with suggestions	1%	2
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	1%	2
The Freedom Pass should indicate what holder's condition is so that local transport operators are aware / Colour coded	0%	1
Evidence: There should be more options generally (unspecified)	0%	1
Evidence: Proof from Social Services/ From Support Workers/ Link Workers	0%	1
Evidence: From Barnet carers	0%	1
Evidence: Personal interview	0%	1
GP's charge a fee for providing a letter	0%	1
Continue with Discretionary Disabled Freedom Pass	0%	1
Unaware of the Freedom Pass / Not aware of entitlements	0%	1
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	0%	1
Evidence: LBB Registration number should still be accepted / Has the LBB Registration number changed its name?	0%	1
Procedures must be monitored to ensure all relevant	0%	1

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Reasons for answer given		
groups have been consulted		
Registered people moving into Barnet would already qualify without having to re-apply	0%	1

**4.1.3 Category b: is profoundly or severely deaf**

**Chart 6: Results for category b**



**Table 7: Questionnaire results for category b**

To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?		
	%	Base
Strongly support	23%	73
Tend to support	25%	81
Neither support nor oppose	17%	53
Tend to oppose	5%	17
Strongly oppose	9%	29
Don't know/not applicable	21%	67
<b>Total</b>	<b>100%</b>	<b>320</b>

- The table above shows that 48 per cent (154 out of 320) of the respondents support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 14 per cent of those responding to the general public consultation disagree with the council's proposal. 17 per cent neither support nor oppose and 21 per cent answered don't know or not applicable.

Respondents were also asked to provide reasons for their answers which are shown below in Table 8.

**Table 8: Comments given for the respondents answer**

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

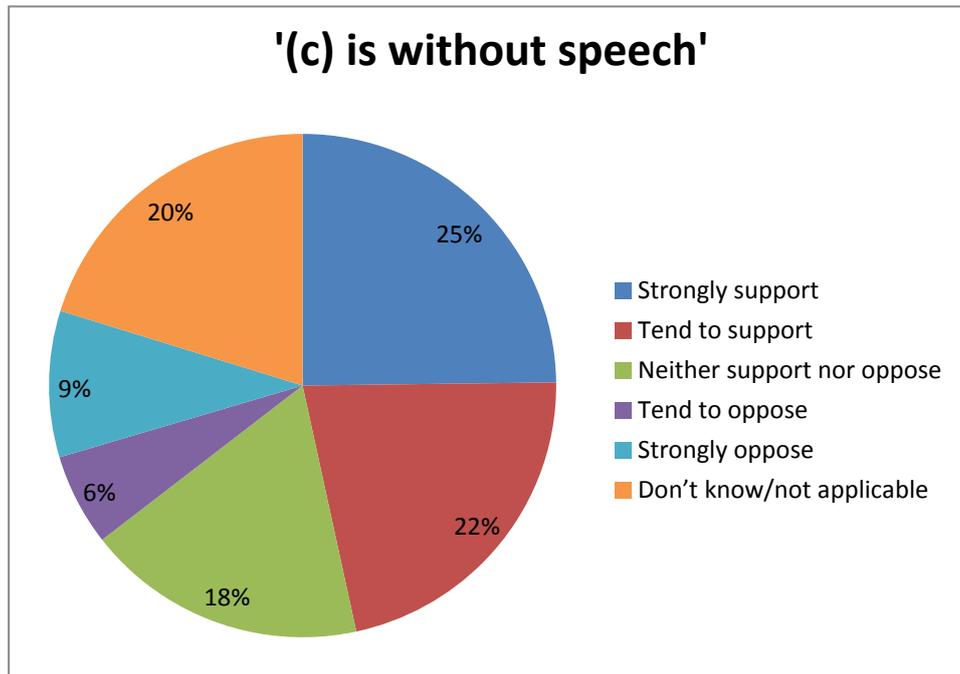
Reasons for answer given		
	%	Base
		320
No reason given	70%	224
Evidence: GP Letter should be accepted	5%	15
Approve of proposals / Approve widening of evidence/ Good to have a choice	4%	14
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	3%	11
Avoid causing stress to people / Don't make life difficult for disabled people.	3%	8
Not applicable - Do not have this impairment	2%	7
For conditions which are unlikely to change over time this should only be required to be submitted once	2%	7
This evidence is easy to obtain / People already have this information/ Simpler for people	2%	6
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	2%	6
Ensures the system is not abused / Provides proof	2%	5
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	2%	5
Process needs to be simple for people with disabilities and impairments/ Should not be too much to read/ Should offer users assistance	1%	4
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	1%	4
Disagree that this condition / impairment warrants a Pass	1%	4
This widens the category of people who can get a Freedom Pass / I could now get a Pass	1%	3
Too much bureaucracy/ Waste of money / Another stress on the service	1%	3
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	1%	3
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	1%	3
Evidence: Listen to, trust the person/ Registration should not be required / Not everyone wants to 'register' and/or receive benefits	1%	2

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Reasons for answer given		
Comment not applicable to question category	1%	2
Evidence: Personal interview	1%	2
Evidence: No other evidence required / Agree with suggestions	1%	2
Every disability should be treated equally	1%	2
Evidence: LBB Registration number should still be accepted / Has the LBB Registration number changed its name?	1%	2
The Freedom Pass should indicate what holder's condition is so that local transport operators are aware / Colour coded	0%	1
Evidence: Proof from Social Services/ From Support Workers/ Link Workers	0%	1
Procedures must be monitored to ensure all relevant groups have been consulted	0%	1
Registered people moving into Barnet would already qualify without having to re-apply	0%	1

**4.1.4 Category c: is without speech**

**Chart 7: Results for category c**



**Table 9: Questionnaire results for category c**

To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?		
	%	Base
Strongly support	25%	76
Tend to support	22%	67
Neither support nor oppose	18%	55
Tend to oppose	6%	18
Strongly oppose	9%	29
Don't know/not applicable	20%	62
<b>Total</b>	<b>100%</b>	<b>307</b>

- The table above shows that 47 per cent (143 out of 307) of the respondents support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 15 per cent of those responding to the consultation do not support the council's proposal. 18 per cent neither support nor oppose and 20 per cent answered don't know or not applicable.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Table 10: Comments given for the respondents answer

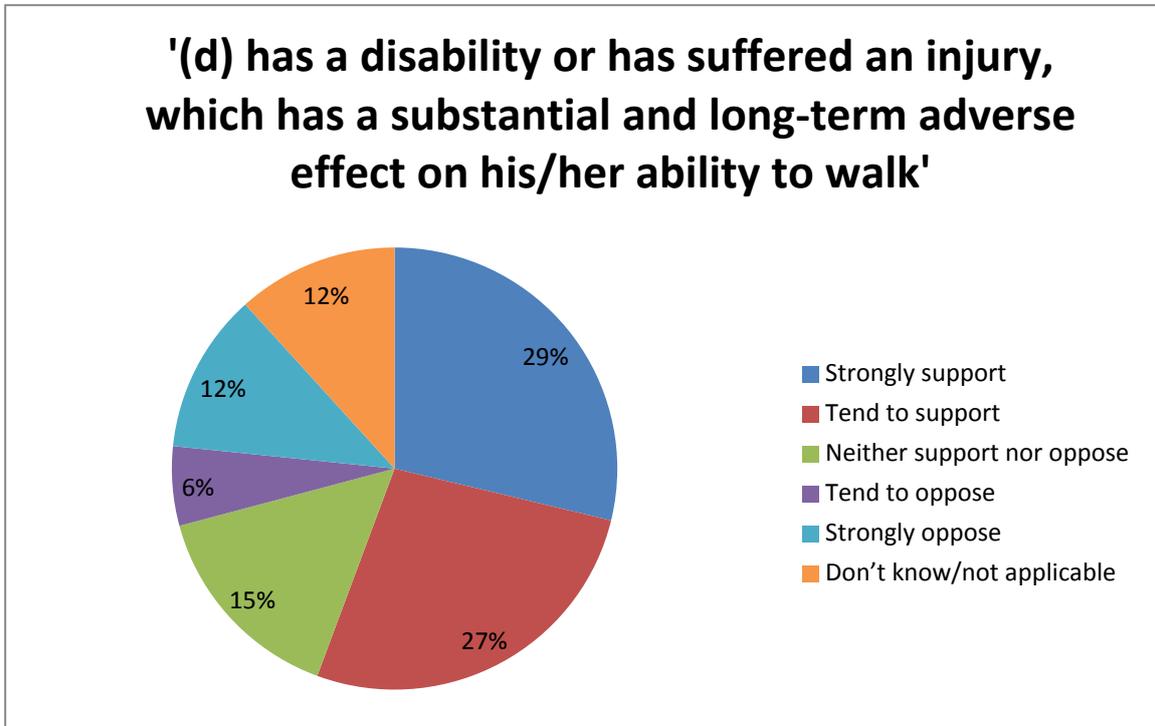
Reasons for answer given		
	%	Base
		306
No reason given	71%	216
Evidence: GP Letter should be accepted	4%	12
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	4%	12
Evidence: No other evidence required / Agree with suggestions	4%	11
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	3%	10
Takes too long to see and get reports from specialists / therapists	3%	10
Avoid causing stress to people / Don't make life difficult for disabled people.	3%	9
Approve of proposals / Approve widening of evidence/ Good to have a choice	2%	7
A physical test alone is not satisfactory - people with some disability often have other non-physical issues/ PIP tests are not always fair - cannot be relied on	2%	7
Not applicable - Do not have this impairment	2%	6
Ensures the system is not abused / Provides proof	1%	4
For conditions which are unlikely to change over time this should only be required to be submitted once	1%	4
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	1%	4
Evidence: LBB Registration number should still be accepted / Has the LBB Registration number changed its name?	1%	4
This evidence is easy to obtain / People already have this information/ Simpler for people	1%	3
Process needs to be simple for people with disabilities and impairments/ Should not be too much to read/ Should offer users assistance	1%	3
Too much bureaucracy/ Waste of money / Another stress on the service	1%	3
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	1%	2
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	1%	2

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Reasons for answer given		
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	1%	2
Unaware of the Freedom Pass / Not aware of entitlements	1%	2
People need this aid / Enables them to use public transport/ Allows independence	0%	1
Evidence: Listen to, trust the person/ Registration should not be required / Not everyone wants to 'register' and/or receive benefits	0%	1
The Freedom Pass should indicate what holder's condition is so that local transport operators are aware / Colour coded	0%	1
Procedures must be monitored to ensure all relevant groups have been consulted	0%	1
Disagree that this condition / impairment warrants a Pass	0%	1
Registered people moving into Barnet would already qualify without having to re-apply	0%	1

**4.1.5 Category d: has a disability, or has suffered an injury, which has a substantial and long-term adverse effect on his ability to walk**

**Chart 8: Results for category d**



**Table 11: Questionnaire results for category d**

<b>To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?</b>		
	<b>%</b>	<b>Base</b>
Strongly support	29%	89
Tend to support	27%	83
Neither support nor oppose	15%	47
Tend to oppose	6%	18
Strongly oppose	12%	36
Don't know/not applicable	12%	36
<b>Total</b>	<b>100%</b>	<b>309</b>

- The table above shows that 56 per cent (172 out of 309) of the respondents support the council’s proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 18 per cent of those responding to the consultation do not support the council’s proposal. 15 per cent neither support nor oppose and 12 per cent answered don’t know or not applicable.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Table 12: Comments given for the respondents answer

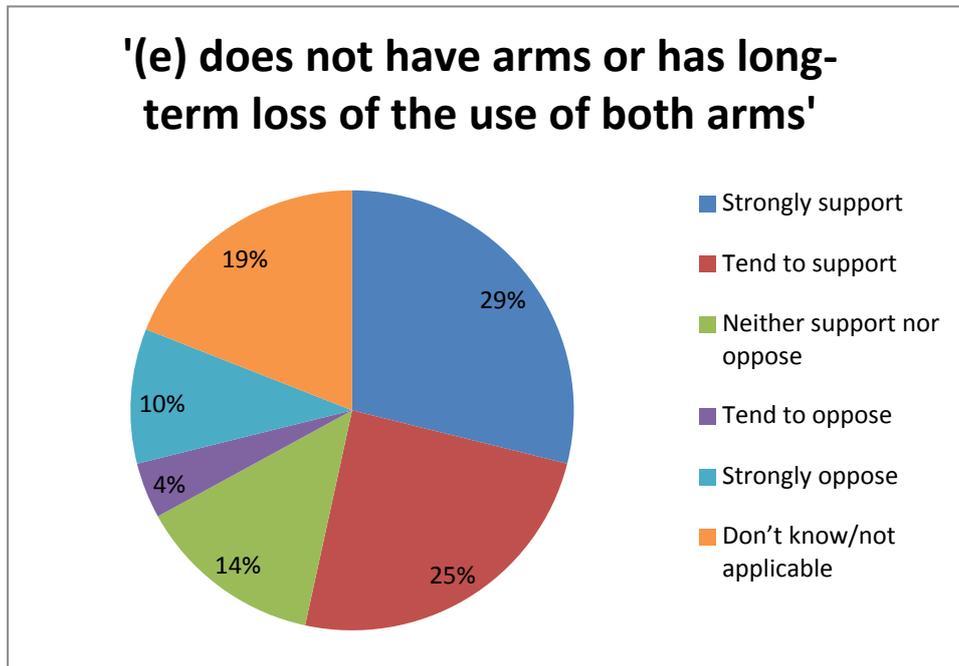
Reasons for answer given		
	%	Base
		308
No reason given	65%	200
Evidence: GP Letter should be accepted	5%	16
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	5%	15
A physical test alone is not satisfactory - people with some disability often have other non-physical issues/ PIP tests are not always fair - cannot be relied on	4%	13
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	4%	13
Evidence: No other evidence required / Agree with suggestions	4%	11
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	3%	8
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	3%	8
For conditions which are unlikely to change over time this should only be required to be submitted once	2%	7
Avoid causing stress to people / Don't make life difficult for disabled people.	2%	7
People need this aid / Enables them to use public transport/ Allows independence	2%	6
Approve of proposals / Approve widening of evidence/ Good to have a choice	2%	5
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	2%	5
Not applicable - Do not have this impairment	1%	4
Ensures the system is not abused / Provides proof	1%	3
Evidence: Listen to, trust the person/ Registration should not be required / Not everyone wants to 'register' and/or receive benefits	1%	3
Evidence: There should be more options generally (unspecified)	1%	3
This evidence is easy to obtain / People already have this information/ Simpler for people	1%	2
This widens the category of people who can get a Freedom Pass / I could now get a Pass	1%	2
Comment not applicable to question category	1%	2
Do not know what these things are / What is a Barnet Social Care Direct registration number/ How do you get one/ How do	1%	2

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Reasons for answer given		
you apply		
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	1%	2
Every disability should be treated equally	1%	2
Evidence: Link to the Blue Badge Scheme	1%	2
Process needs to be simple for people with disabilities and impairments/ Should not be too much to read/ Should offer users assistance	0%	1
Too much bureaucracy/ Waste of money / Another stress on the service	0%	1
Evidence: Proof from Social Services/ From Support Workers/ Link Workers	0%	1
Evidence: Personal interview	0%	1
Takes too long to see and get reports from specialists / therapists	0%	1
Unaware of the Freedom Pass / Not aware of entitlements	0%	1
Evidence: LBB Registration number should still be accepted / Has the LBB Registration number changed it's name?	0%	1
Procedures must be monitored to ensure all relevant groups have been consulted	0%	1
Be more stringent - Must be a long term disablement	0%	1

**4.1.6 Category e: does not have arms, or have long term loss of both arms**

**Chart 9: Results for category e**



**Table 13: Questionnaire results for category e**

To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?		
	%	Base
Strongly support	29%	85
Tend to support	25%	72
Neither support nor oppose	14%	40
Tend to oppose	4%	12
Strongly oppose	10%	29
Don't know/not applicable	19%	56
<b>Total</b>	<b>100%</b>	<b>293</b>

- The table above shows that 54 per cent (157 out of 293) of the respondents support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 14 per cent of those responding to the consultation do not support the council's proposal. 14 per cent neither support nor oppose and 19 per cent answered don't know or not applicable.

**Table 14: Comments given for the respondents answer**

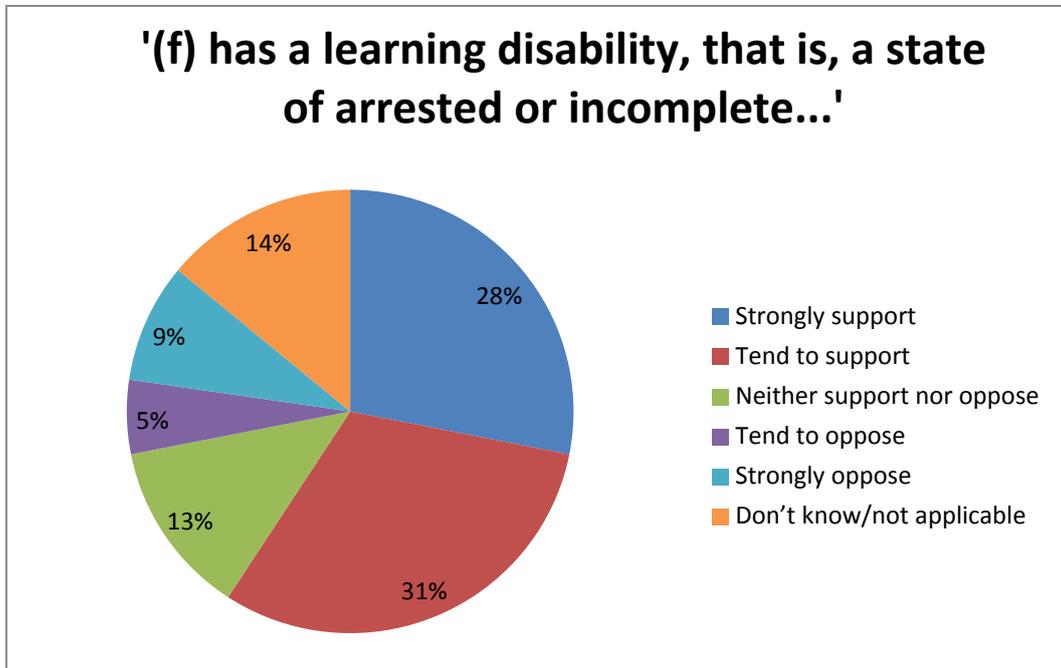
Reasons for answer given		
	%	Base

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Reasons for answer given		
		293
No reason given	75%	219
Evidence: No other evidence required / Agree with suggestions	5%	16
An obvious, visible disability should not require documentation	4%	11
Evidence: GP Letter should be accepted	2%	7
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	2%	7
Not applicable - Do not have this impairment	2%	6
Avoid causing stress to people / Don't make life difficult for disabled people.	2%	6
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	2%	5
For conditions which are unlikely to change over time this should only be required to be submitted once	2%	5
Approve of proposals / Approve widening of evidence/ Good to have a choice	1%	4
Comment not applicable to question category	1%	3
Evidence: Personal interview	1%	3
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	1%	3
People need this aid / Enables them to use public transport/ Allows independence	1%	2
Too much bureaucracy/ Waste of money / Another stress on the service	1%	2
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	1%	2
Ridiculous / Disgraceful (not expanded)	1%	2
Process needs to be simple for people with disabilities and impairments/ Should not be too much to read/ Should offer users assistance	0%	1
Ensures the system is not abused / Provides proof	0%	1
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	0%	1
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	0%	1
Every disability should be treated equally	0%	1
Procedures must be monitored to ensure all relevant groups have been consulted	0%	1
Evidence : Photograph	0%	1

**4.1.7 Category f: has a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning**

**Chart 10: Results for category f**



**Table 15: Questionnaire results for category f**

To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?		
	%	Base
Strongly support	28%	84
Tend to support	31%	93
Neither support nor oppose	13%	38
Tend to oppose	5%	16
Strongly oppose	9%	26
Don't know/not applicable	14%	42
Total	100%	299

- The table above shows that 59 per cent (177 out of 299) of the respondents support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 14 per cent of those responding to the consultation do not support the council's proposal. 13 per cent neither support nor oppose and 14 per cent answered don't know or not applicable.
-

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Table 16: Comments given for the respondents answer

Reasons for answer given		
	%	Base
		298
No reason given	69%	205
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	5%	14
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	3%	10
Evidence: GP Letter should be accepted	3%	9
Approve of proposals / Approve widening of evidence/ Good to have a choice	3%	9
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	3%	9
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	3%	8
Not applicable - Do not have this impairment	3%	8
This directly affects household/ person	3%	8
Evidence: No other evidence required / Agree with suggestions	2%	7
People need this aid / Enables them to use public transport/ Allows independence	2%	5
Process needs to be simple for people with disabilities and impairments/ Should not be too much to read/ Should offer users assistance	2%	5
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	2%	5
For conditions which are unlikely to change over time this should only be required to be submitted once	1%	4
Avoid causing stress to people / Don't make life difficult for disabled people.	1%	4
More efficiency required / Fewer mistakes made	1%	3
This widens the category of people who can get a Freedom Pass / I could now get a Pass	1%	2
Ensures the system is not abused / Provides proof	1%	2
Too much bureaucracy/ Waste of money / Another stress on the service	1%	2
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	1%	2

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Reasons for answer given		
Disagree that this condition / impairment warrants a Pass	1%	2
Offer Pass to Carers as well	1%	2
Evidence: Proof from Social Services/ From Support Workers/ Link Workers	0%	1
Evidence: From Barnet carers	0%	1
Do not know what these things are / What is a Barnet Social Care Direct registration number/ How do you get one/ How do you apply	0%	1
Evidence: LBB Registration number should still be accepted / Has the LBB Registration number changed its name?	0%	1
Procedures must be monitored to ensure all relevant groups have been consulted	0%	1
An obvious, visible disability should not require documentation	0%	1
Making receipt of benefits a criteria encourages people not to find work	0%	1
Registered people moving into Barnet would already qualify without having to re-apply	0%	1
Evidence: Educational attainment, or lack of it	0%	1

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

4.1.8 Category g: would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol

Chart 11: Results for category g

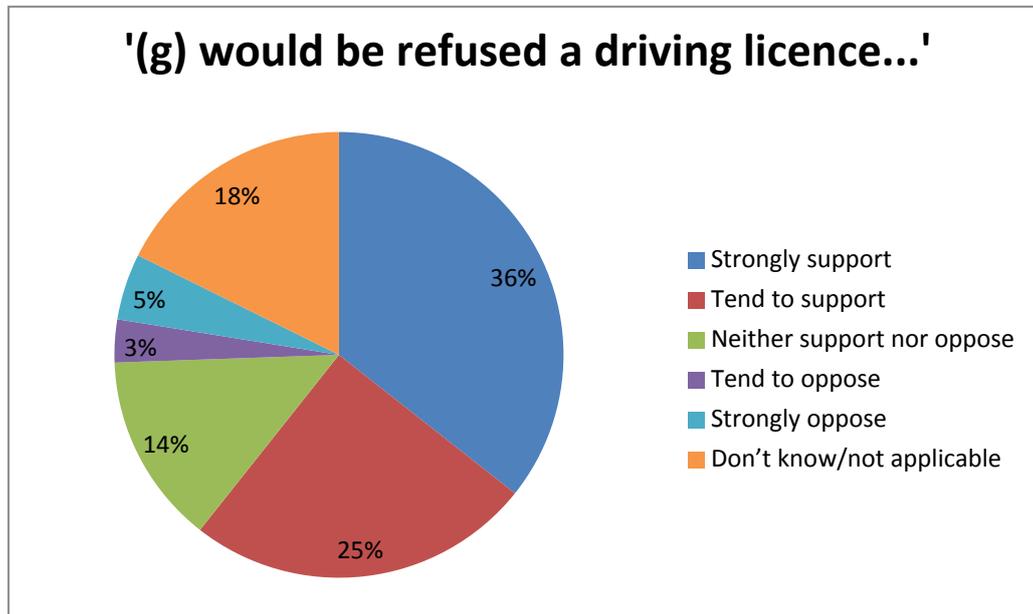


Table 17: Questionnaire results for category g

To what extent do you support or oppose the proposed changes for the evidence required for a person with a disability under this category?		
	%	Base
Strongly support	36%	103
Tend to support	25%	72
Neither support nor oppose	14%	40
Tend to oppose	3%	9
Strongly oppose	5%	14
Don't know/not applicable	18%	51
Total	100%	289

- The table below shows that 61 per cent (175 out of 289) of the respondents support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- In contrast, 8 per cent of those responding to the consultation do not support the council's proposal. 14 per cent neither support nor oppose and 18 per cent answered don't know or not applicable.

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Table 18: Comments given for the respondents answer

Reasons for answer given		
	%	Base
		288
No reason given	73%	210
Approve of proposals / Approve widening of evidence/ Good to have a choice	4%	11
E Evidence: GP Letter should be accepted	3%	10
Evidence: No other evidence required / Agree with suggestions	3%	9
Open to abuse/ not sure suggested evidence valid where mental health involved / Not clear / Too vague	3%	8
People need this aid / Enables them to use public transport/ Allows independence	2%	7
Everyone with this impairment should get a pass (even if less severe) / Needs to be not too strict/ More flexibility required	2%	7
Other people must not be put at risk by unfit drivers	2%	7
Evidence: Hospital/ Consultant/ Specialist/ Therapist / NHS diagnosis proof	1%	4
Evidence: Proof from Social Services/ From Support Workers/ Link Workers	1%	4
People may have an impairment but do not have paper evidence of it/ Are not in receipt of related benefits/ Not registered anywhere	1%	4
The system / current requirements are fine as they are / Eligibility has not changed/ Waste of money	1%	4
Evidence: List of medications taken	1%	4
Ensures the system is not abused / Provides proof	1%	3
Not applicable - Do not have this impairment	1%	3
Avoid causing stress to people / Don't make life difficult for disabled people.	1%	3
'Current evidence' section in booklet confusing / possibly in error	1%	3
This widens the category of people who can get a Freedom Pass / I could now get a Pass	1%	2
Evidence: Proof of receipt of disability related benefit : Disability Living Allowance (DLA)/ Proof of Disability Income Support/ PIP: All should be eligible for pass/ Include Low Level DLA	1%	2
For conditions which are unlikely to change over time this should only be required to be submitted once	1%	2

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

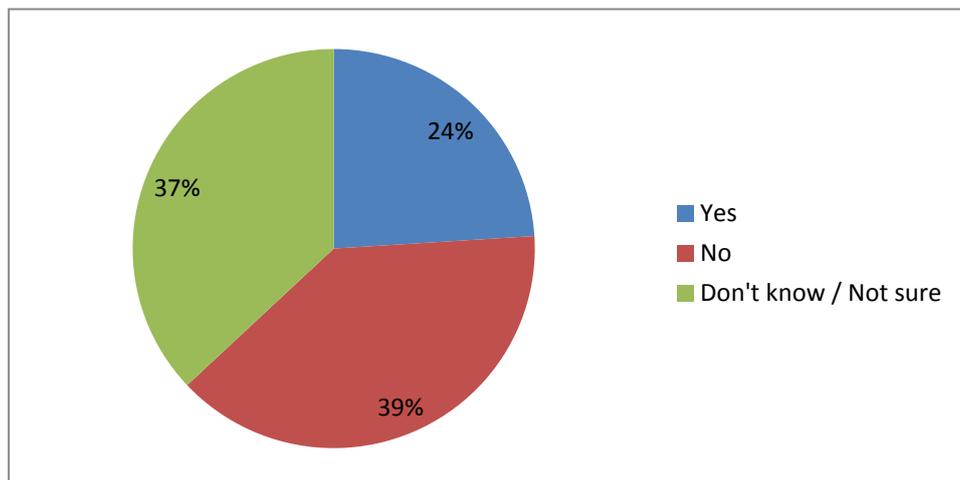
Reasons for answer given		
Suspect these measures are designed to deny more people passes to save a few pounds / Don't take free travel away	1%	2
This directly affects household/ person	1%	2
This evidence is easy to obtain / People already have this information/ Simpler for people	0%	1
Too much bureaucracy/ Waste of money / Another stress on the service	0%	1
GP's charge a fee for providing a letter	0%	1
Do not know what these things are / What is a Barnet Social Care Direct registration number/ How do you get one/ How do you apply	0%	1
Takes too long to see and get reports from specialists / therapists	0%	1
Evidence: Means testing	0%	1

### 4.2 Results from additional information questions

#### 4.2.1 Evidence which should be considered

Respondents were asked whether they believe any evidence has been missed and should be considered for the final criteria. Respondents who answered 'Yes' were then asked to state their reasons for their answer.

**Chart 12: Results for whether respondents think evidence has been missed**



## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

**Table 19: Questionnaire results for any other evidence to be considered**

Do you think we have missed any evidence which should be included in proving the eligibility for Disabled Persons Freedom Passes?		
	%	Base
Yes	24%	72
No	39%	116
Don't know / Not sure	37%	109
Total	100%	297

- The table above shows that 24 per cent (72 out of 297) of the respondents believe evidence support the council's proposal to accept additional types of evidence as proof that someone qualifies for a pass.
- Below is the table of comments which relates to respondents who believe evidence has been missed. The comments have been grouped under each suggested evidence.

**Table 20: Comments from those who answered 'Yes' to evidence which has been missed**

If you answered 'Yes', please state the reasons for your answer below:	
	Count
All benefits should be accepted/ lots of hospital appointment letters	1
Specialist medical reports from Consultants that detail the underlying issues as opposed to the fluctuating symptoms that will be different on different days – e.g. MRI Scans, consultant radiologist reports, consultant orthopaedic reports	1
You forgot to add autism, ASD, special needs, mental health, Asperger's syndrome & non-verbal communication.	5
Link workers in GP surgeries should be accepted as evidence	3
All the evidence of luck and failed governance are already presented in this survey.	1
Letter from GP should be accepted for those without speech	1
Evidence from GP should be accepted	14
Low/medium care component of DLA allowance should also qualify as this can impede movement	1
Several major surgeries bowel removal numerous toilet visit 24/7 unsuccessful drugs trial caused serious asthma osteoporosis caused bas fall earlier this year - still improving	1
I have suffered from birth with a bad back some days I am okay other days I can't move this freedom pass helps me so much I do hope I get to keep it.	1
Evidence of benefits relating to a disability is sufficient	1
Evidence of attending a special needs school	1
Process needs to be clear and efficient, request for all documents at once and quick turnaround of issuing passes. Ensure the team dealing	2

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

If you answered 'Yes', please state the reasons for your answer below:

	Count
with applicants are compassionate and helpful to applicants.	
As stated earlier I have been some people refused because of certain situations	1
People who have multi handicaps and are only put on one team	1
Listen to the patient	2
Cat G: anxiety and panic attacks should be included in this category	1
By ignoring the statutory rights granted by the Concessionary Bus Travel Act 2007 you have missed a great deal of evidence that is accepted elsewhere outside Barnet Council.	1
Include ESA and other benefits relating to disabilities, social groups and organisations can support the application as evidence	3
For those with hearing loss should liaise with the individuals via a text message.	1
Evidence from any medical professional	1
Residents who have other disability effecting their mobility but not receiving other benefits should be eligible such as Chronic Fatigue syndrome/ ME/ uncontrolled asthmatic	1
What about for people with mental health illness?	4
People should be asked to attend an interview if there is any doubt about their disability.	1
It is bureaucratic and insensitive.	2
Timing	1
Anyone claiming disability income support should also be eligible under the criteria!	1
Freedom Pass is essential for independence	1
Should be included in community Barnet	1
The effort that an individual actively puts in to improve his/her health, wellbeing and prospects.	1
The distance travelled or the number of journeys taken by an individual over a period of time.	1
LD as few will access psychologist/psychiatrist services	1
Autistic spectrum to include high functioning/Asperger's a GP letter confirming this condition should suffice	
Evidence from consultant/hospital	6
Should take into consideration people who are severely depressed and severely physically impaired.	1
No further evidence	2
Evidence person already holds a blue badge	1
Active checking for fraudulent users	2
Asthma sufferer and lot of medications.	1
People who suffer diabetic hypos should be considered too	1
A person should have either a freedom pass or blue badge but not	1

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

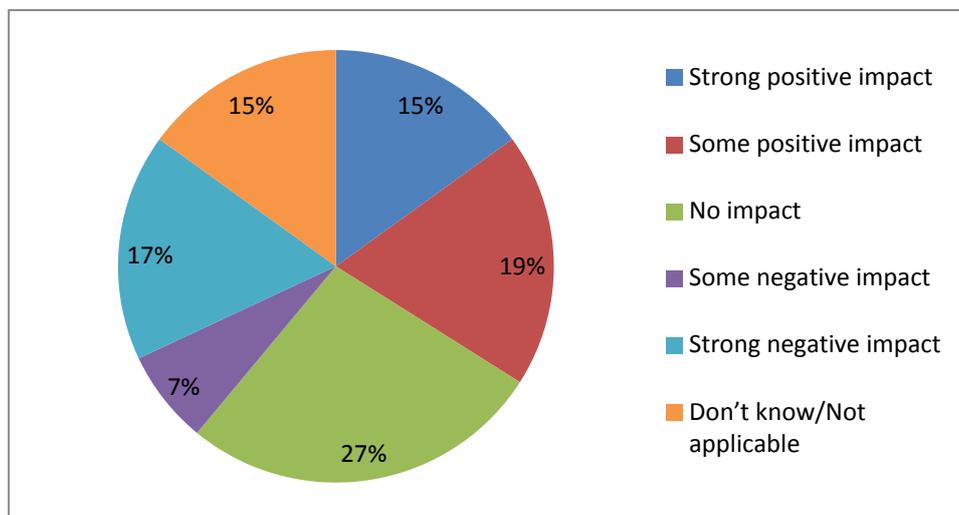
If you answered 'Yes', please state the reasons for your answer below:

	Count
both. People over 60 qualify for the pass from transport for London. No need for Barnet to give them to anyone 60 or over.	
Some people become immobile through illness rather than injury	1
Applications should be assessed case by case	2
Key worker/ support worker or social services could possibly provide supporting evidence	1
Accept evidence of brain injury	1
Persons with Visual Impairment should still be allowed to use their LBB registration number	1
Accept GP letter for those who are profoundly or severely deaf or blind.	1
Once evidence has been provided automatically renew	2
Total number of different types of comments	48

### 4.2.2 Negative or positive impact

Respondents were asked to give an answer on whether they feel the changes would have a negative or positive impact on their lives if approved as proposed.

**Chart 13: Results for positive or negative impact on your life**



**Table 21: Questionnaire results for positive or negative impact on your life**

Do you think the proposed changes will have a positive or negative impact on your life?		
	%	Base
Strong positive impact	15%	44
Some positive impact	19%	57
No impact	27%	81
Some negative impact	7%	21

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Strong negative impact	17%	50
Don't know/Not applicable	15%	46
Total	100%	299

- The table above shows 34 per cent (101 out of 299) respondents believe the proposals will have a positive impact on their lives.
- 27 per cent of respondents do not think it will impact their lives.
- In contrast, 24 per cent believe the proposals will have a negative impact on their lives.
- The table below shows the comments provided by respondents on why they think the proposals would positively or negatively impact their lives.

**Table 22: Reasons for answer**

Reasons for answer given		
	%	Base
		71
No reply	32%	23
Would lose independence/ Unable to attend groups, College, Work	23%	16
Concern may lose Freedom Pass	20%	14
Would cause more stress and worry	15%	11
Renewal process is unnecessarily complicated / Too much paperwork	14%	10
Criteria is too strict/narrow. / Concern that will be harder to qualify	13%	9
Unnecessary to apply repeatedly for a long-standing condition	7%	5
Cannot afford fares / Cannot afford to lose pass	4%	3
Ensure that those who need it most continue to get it	3%	2
GP Evidence should be accepted. Disabled people know and trust their GP.	3%	2
May have difficulty understanding fares and tickets	1%	1
May prejudice against people with Autism	1%	1
It is harder now to obtain evidence, to access professionals	1%	1
The concept that Barnet Council is treating disabled people badly	1%	1

# DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

## 4.2.3 How users would prefer to submit evidence to the council

Chart 14: Results for preferred method to submit evidence over the page

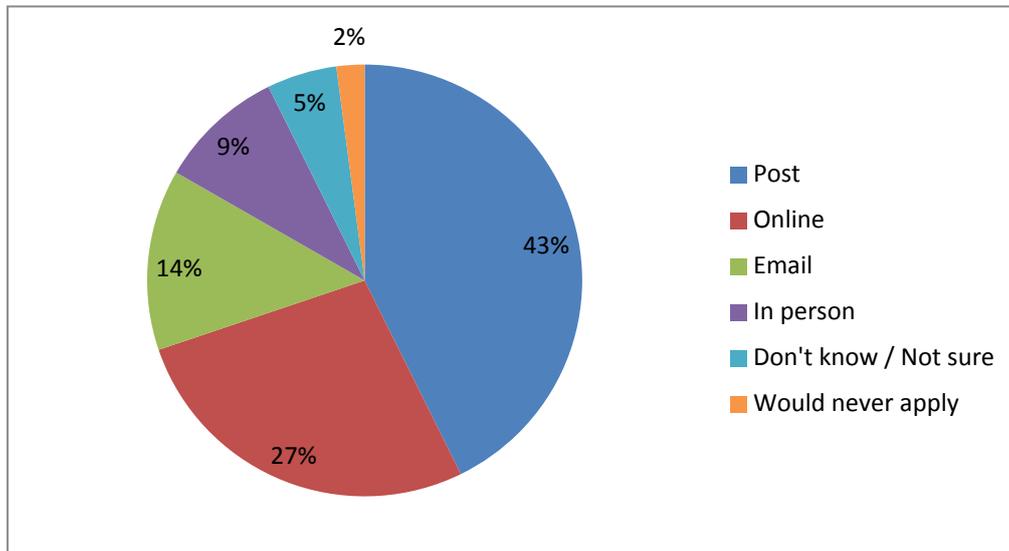


Table 23: Questionnaire results for how to submit evidence.

How would you prefer to submit evidence to the council of your recognised disability?		
	%	Base
Post	41%	123
Online	26%	77
Email	13%	38
In person	9%	28
Don't know / Not sure	5%	15
Would never apply	2%	7
<i>Additional comments below:</i>		
<i>Several - Need a choice of options/alternatives. Depends on source / type of evidence</i>	1%	4
<i>In person with someone coming to me</i>	1%	4
<i>You need to offer a choice, alternatives generally</i>	1%	1
<i>Via GP</i>	1%	3
<i>Several - Need a choice of options/alternatives. Depends on health/ability at the time</i>	0%	1
<i>Telephone</i>	0%	2
<b>Total</b>		<b>300</b>

➤ 41 per cent of the respondents would prefer to submit evidence by post.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

- Through comments provided, 6 alternative options were presented. Of these options, respondents think all options should be available and applicants should be able to provide evidence in person.

### 4.2.4 Help completing a form

Chart 15: Results for completing a form

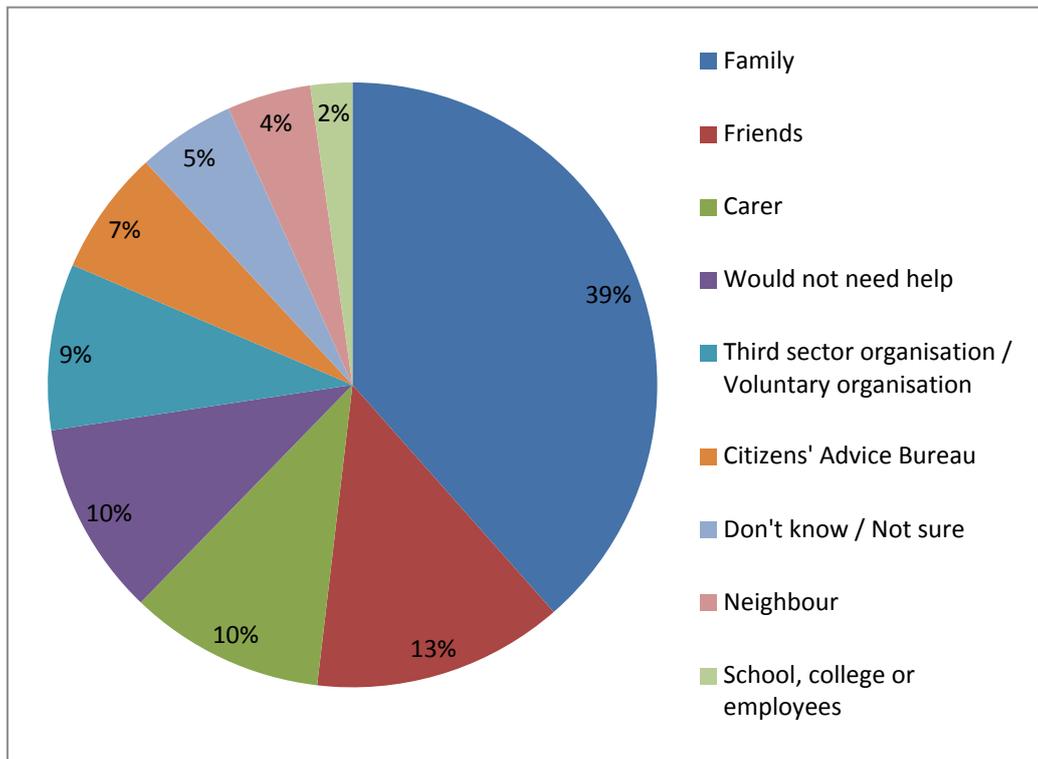


Table 24: Questionnaire results for help completing a form

If you needed help to complete a form, who would help you?		
	%	Base
Family	52%	152
Friends	18%	53
Carer	14%	42
Would not need help	14%	42
Third sector organisation / Voluntary organisation	12%	35
Citizens' Advice Bureau	9%	26
Don't know / Not sure	7%	20
Neighbour	6%	16
School, college or employees	3%	8
<i>Additional comments below:</i>		
<i>Social worker / Support worker</i>	2%	7
<i>Barnet Council Drop-In centre/ Officer from Barnet Council</i>	2%	5
<i>Nurse / Therapist</i>	1%	3

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

If you needed help to complete a form, who would help you?		
<i>Barnet Learning Disabilities Team</i>	0%	1
<i>GP</i>	0%	1
Total		290

- Respondents were asked how much support they would need to complete a form online. Respondents were asked to provide any other mediums for support, of which four other options were given.
- 7 respondents would ask a social worker or support worker to help them complete a form and 5 respondents would receive help from the council/council drop in session.
- The table below shows the responses for how much support respondents would require to complete an online form.
- 35 per cent of respondents would require a lot of support to complete a form and in contrast, 26 per cent of respondents would not require any support.

**Table 25: Questionnaire results for help completing a form**

At the moment, how much support would you need to complete an online form through the council website?		
	%	Base
A lot of support	35%	102
Some support	19%	55
A little support	10%	29
None	26%	75
Don't know/Not sure	7%	20
Not applicable	3%	9
Total		290

### 4.2.5 Stakeholder analysis

- Table 26 below shows the stakeholder responses, 80 per cent (238 out of 299) of the respondents are Disabled Persons Freedom Pass holders.
- There was a slight majority of male respondents to female respondents.
- The majority of respondents were aged 56-60 years old.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Table 26: Stakeholders

About you: To help us understand the feedback you give us, please tick the most appropriate box:		
	%	Base
I currently hold a Disabled Persons Freedom Pass	80%	238
I currently hold an Older Persons Freedom Pass	4%	12
I would like to apply for a Disabled Persons Freedom Pass	2%	5
I am a relative, carer or friend of someone who uses a Disabled Persons Freedom Pass and always help completing forms	6%	19
I am a relative, carer or friend of someone who uses a Disabled Persons Freedom Pass	2%	7
My job involves work with Freedom Pass users in Barnet	2%	5
I am a Barnet resident and interested in Disabled Persons Freedom Passes for other reasons	2%	7
Representing a voluntary/community organisation	1%	4
Representing a public sector organisation	1%	2
<i>Additional comments below:</i>	1%	3
<i>Automatic renewal</i>	0%	1
<i>Responding on behalf of a family member</i>	0%	1
<i>Applicable to more than one category</i>	0%	1
Total		301

- The table below shows the categories under 'Other' which were provided as comments by respondents of their disability.

### 4.2.6 Disabled Persons Freedom Pass users – use of pass

- 47 per cent of respondents use their pass to go to the Hospital, GP or other medical practice.
- 26 per cent use their pass for social visits to friends, family etc.

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Table 27: Results for use of Disabled Persons Freedom Pass

What do you use your Disabled Persons Freedom Pass for most often?		
	%	Base
Hospital, GP or other medical practice	47%	109
Visit friends or family or other social visit	26%	60
Work	24%	57
Social / youth club	8%	19
Various - unspecified	6%	15
School / College / University	6%	14
Care centre	6%	13
Shopping	5%	11
Group (Therapy / Project)	3%	6
Library	1%	2
Place of worship	0%	1
Voluntary work	0%	1
Job interviews	0%	1
Nothing: Only have it because can, do not use	0%	1
Total		234

### 4.2.7 Applying for and renewing your Freedom Pass

- 57 per cent of respondents use paper to apply for or renew their Freedom Pass.
- In contrast, 34 per cent of respondents use the online.
- 3 per cent receive an automatic renewal of their Freedom Pass.

Table 28: Results of methods used for applying/renewing a Freedom Pass

Which method do you currently use when applying/renewing your Freedom Pass?		
	%	Base
Online	34%	79
Paper	57%	134
Not applicable - It is automatically renewed	3%	7
Telephone	1%	3
Can't remember	3%	6
In person	0%	1
Not renewed it yet	3%	6
Total		236



## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Table 30: Protected characteristics describing disabilities of the respondents

Please select the definition/s from the list below that best describes your disability/disabilities:		
	%	Base
Hearing (such as deaf, partially deaf or hard of hearing)	11%	25
Vision (such as blind or fractional/partial sight. Does not include people whose visual problems can be corrected by glasses/contact lenses)	14%	34
Speech (such as impairments that can cause communication problems)	11%	26
Mobility (such as wheelchair user, artificial lower limb(s), walking aids, rheumatism or arthritis)	33%	77
Physical co-ordination (such as manual dexterity, muscular control, cerebral palsy)	12%	28
Reduced physical capacity (such as inability to lift, carry or otherwise move everyday objects, debilitating pain and lack of strength, breath, energy or stamina, asthma, angina or diabetes)	31%	72
Severe disfigurement	0%	1
Learning difficulties (such as dyslexia)	21%	49
Mental illness (substantial and lasting more than a year, such as severe depression or psychosis)	25%	58
Prefer not to say	2%	4
<i>Additional comments below:</i>	23%	53
Autism	2%	5
Addison's disease	0%	1
Bones removed on both wrists, eye surgery, nerve problems, curved spine	0%	1
Brain injury	0%	1
Broken shoulder, mastectomy, arthritis	0%	1
Cancer	1%	3
CIDP	0%	1
Claustrophobic, anxiety	0%	1
COPD	1%	2
Diabetes	0%	1
Down's syndrome	0%	1
Emotional problems	0%	1
Epilepsy	6%	15
Gastro paresis	0%	1

## DISABLED PERSONS FREEDOM PASS CONSULTATION 2016

Please select the definition/s from the list below that best describes your disability/disabilities:		
Haemophilia	0%	1
Hemiplegic left side, glaucoma (severe)	0%	1
Hepatitis C	0%	1
HIV	1%	2
Irritable Bowel Syndrome	0%	1
Myalgic encephalomyelitis	0%	1
Mobility	1%	2
Multiple sclerosis	1%	2
Narcolepsy	0%	1
No peripheral vision	0%	1
Paralysed limb	0%	1
Parkinson's Disease	1%	2
Sciatic pain (nerve pain) back pain	0%	1
Heart Failure with Reduced Ejection Fraction, Ischemic Heart Disease with myocardial infarction, Primary prevention ICD, Diabetic Neuropathy, Myo Cardiac Perfusion scan, Dilated left Ventricle with severely impaired dictolic function LV	0%	1
Spina bifida	0%	1

# Disabled Persons Freedom Pass

## Supporting Information Request Form

The London Borough of Barnet is required to assess eligibility for a Disabled Persons Freedom Pass. We need to establish if the below named applicant is medically fit to drive in regards to their medical condition(s). We would be grateful if you could in your professional opinion supply us with the necessary information. This is in reference to the criteria set by the Department for Transport.

***"Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol."***

Name of Applicant	
Date of Birth	
Address	

1.	Is the applicant able to drive in view of their medical condition?	<b>Yes</b>	<b>No</b>
2.	Please list their diagnosis/treatment below:		
3.	Has your decision been made based on the DVLA Medical Standards of Fitness to Drive? See link below: <a href="http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/418165/aagv1.pdf">www.gov.uk/government/uploads/system/uploads/attachment_data/file/418165/aagv1.pdf</a>	<b>Yes</b>	<b>No</b>
4.	Does the following information apply to your patient named above?  <i>"Would, if he/she applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol."</i>	<b>Yes</b>	<b>No</b>
5.	Have you advised the applicant of your recommendations for the cessation for driving?	<b>Yes</b>	<b>No</b>

6.	Have you recommended a review date regarding either applicant's conditions or driving? If 'Yes' please provide the date of this review _____	<b>Yes</b>	<b>No</b>
----	---	------------	-----------

GP Signature: \_\_\_\_\_ Date (dd/mm/yyyy): \_\_\_\_\_

Designated Profession: \_\_\_\_\_

Organisation Stamp

Information for GP:

Please return this form to: **Freedom.passes@barnet.gov.uk**

Alternatively, please give the form to your patient to return to the London Borough of Barnet.

Information for Applicants:

Please return this form to: **Freedom.passes@barnet.gov.uk**

**Or,**

Please post this completed form to:

**Freedom Pass Team, London Borough of Barnet  
 North London Business Park,  
 Oakleigh Road South,  
 London, N11 1NP**

Please note: if this form is not fully completed the applicants request for a Freedom Pass will be refused due to insufficient evidence of their entitlement to this concession.

## Equality Impact Analysis (EIA) Resident/Service User

<b>1. Details of function, policy, procedure or service:</b>	
Title of what is being assessed: Revised assessment criteria for Disabled Persons Freedom Pass	
Is it a new or revised function, policy, procedure or service? Service	
Department and Section: Commissioning Group, Parking	
Date assessment completed: 17/11/2016	
<b>2. Names and roles of people completing this assessment:</b>	
Lead officer	Sam Pandya
Stakeholder groups	Disabled Persons, third sector organisations, internal departments (Barnet Learning Disability Service, Adults and Children's Services)
Representative from internal stakeholders	Barnet Communications Team, Adults and Communities Team, 0-25 team, Barnet Learning Disability Service, Mental Health Team
Representative from external stakeholders	
Delivery Unit Equalities Network rep	Lesley Holland
Performance Management rep	
HR rep (for employment related issues)	
<b>3. Full description of function, policy, procedure or service:</b>	
Please describe the aims and objectives of the function, policy, procedure or service. The vision for the Disabled Persons Freedom Pass application and renewals process is for an accessible exemplar high quality process that provides the best user experience possible for our residents. The aim of the project is to ensure the Disabled Persons Freedom Pass process within Barnet adheres to the Department for Transport guidance and Section 240 of the Greater London	

Authority Act 1999 as amended by section 151 the Transport Act 2000.

To achieve this our proposals include an expansion of acceptable documents to support an application, reviewing the way an individual can apply for a Disabled Persons Freedom Pass and making documents more accessible for users. The Council recognises that in order to deliver an excellent service, good access to the process is crucial. The Council has committed to continue including third sector organisations, service users and subject matter specialists in any service developments or proposed changes that could have an impact on any service user.

Following the review, a revised assessment criteria has been developed which aligns more closely to the legislation and provides a fairer and robust procedure.

The project will affect those who already hold a Disabled Persons Freedom Pass and those who are considering applying for a pass by the types of evidence Barnet council will accept as proof of the applicant's recognised disability.

The revised criteria will also align more closely with other London Boroughs providing a more uniform service around London.

In assessing the equalities impact of these proposals we have taken account of the nine protected characteristic outlined in the 2010 equalities act and the additional categories identified by Barnet council e.g. those on low wage, single parent families, people who are unemployed, people who are on benefit. We have also used evidence about existing pass holders and new applicants.

<p><b>How are the equality strands affected?</b> <i>Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.</i></p>			
Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
1. Age	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p>Through review of the databases, 1358 Disabled Persons Freedom Pass holders to date (November 2016) will be transferred to Older Persons Freedom Pass. This will have no difference to pass holders because the use criteria are the same and the renewal process for an Older Persons Freedom Pass is automatic.</p> <p>The outcome of the review will also result in a more thorough database checking which will mean persons who are eligible for an Older Persons pass will be transferred as soon as they become eligible.</p>	<p>Once assessment criteria are approved by committee following the December 2016 Policy &amp; Resources Committee meeting, Letters will be sent to all those pass holders who will be transferred at the next renewal date or if they replace their pass before their next renewal.</p> <p>Weekly database checks will be completed so persons are transferred to the older persons pass when they become eligible.</p>
2. Disability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p>Changes in the assessment criteria and the evidence required for proof of eligibility may affect some people with mental health conditions and learning disabilities/autism.</p> <p>The council recognises that historically, Barnet had interpreted an 'eighth criterion' from the Department for Transport (DfT) Guidance which it has referred to as 'Mental Health'. Therefore a number of pass holders have been granted a pass under this criterion.</p>	<p>The changing criteria will be brought to the attention of all pass holders outlining the new standard of evidence required.</p> <p>Any change in eligibility will be discussed on a one-to-one basis with existing pass holders.</p> <p>The proposed criteria incorporates Mental Health conditions within the Department for Transport Category of '<i>Refused a driving licence, other than on the grounds of persistent misuse of drugs or alcohol</i>' which allows applicants suffering as described in the</p>

			<p>DfT guidance thus fully adhering to the seven recognised disabilities.</p> <p>During the consultation Barnet voice for mental health were consulted with to explain the category and legislation which the council is bound by. Members of Barnet voice were invited to present any questions to the team via the email, phone and at the meetings</p> <p>Applicants with autism will be advised of the evidence requirements for learning disabilities.</p>
3. Gender reassignment	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Not known no data	
4. Pregnancy and maternity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Not known. It is possible that pass holders will be pregnant no impact anticipated.	
5. Race / Ethnicity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	No data available on pass holders.  We do not anticipate any negative impact on this ground.	
6. Religion or belief	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	No data available on pass holders.  We do not anticipate any negative impact on this ground.	
7. Gender / sex	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	No data available on pass holders.  We do not anticipate any negative impact on this ground.	
8. Sexual orientation	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	No data available on pass holders.  We do not anticipate any negative impact on this ground.	
9. Marital Status	Yes <input type="checkbox"/>	No data available on pass holders.	

	No <input checked="" type="checkbox"/>	We do not anticipate any negative impact on this ground.	
<p><b>10. Other key groups?</b></p> <p>Carers</p> <p>People with mental health issues</p> <p>Some families and lone parents</p> <p>People with a low income</p> <p>Unemployed people</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>	<p>The council recognises that historically, Barnet had interpreted an 'eighth criterion' from the Department for Transport (DfT) Guidance which it has referred to as 'Mental Health'. Therefore a number of pass holders have been granted a pass under this criterion.</p>	<p>The proposed criteria incorporates Mental Health conditions within the Department for Transport Category of '<i>Refused a driving licence, other than on the grounds of persistent misuse of drugs or alcohol</i>' which allows applicants suffering as described in the DfT guidance thus fully adhering to the seven recognised disabilities.</p> <p>During the consultation Barnet voice for mental health were consulted with to explain the category and legislation which the council is bound by. Members of Barnet voice were invited to present any questions to the team via the email, phone and at the meetings.</p>

Young people not in employment education or training	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
--	--	--	--

**4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?**

There might be a perception of negative impact if the community considered that Barnet was withdrawing a benefit from vulnerable residents.

**5. How does the proposal enhance Barnet’s reputation as a good place to work and live?**

No impact anticipated.

The project will provide a better quality and more effective service for users which is fairer and will ensure those who require the service can access it. It will be robust and align more closely with legislation to prevent fraud and also ensure there is suitable support and guidance for those who are wishing to apply or renew their pass.

Improvements to the current processes will also take place to ensure that the service user is able to apply or renew a Disabled Persons Freedom Pass with ease.

Three quarters of Barnet residents (74 per cent) are satisfied with how Barnet Council runs things.

**6. How will members of Barnet’s diverse communities feel more confident about the council and the manner in which it conducts its business?**

The revised process will be open, transparent and robust which will ensure members of Barnet’s diverse communities the process is fair and consistent for all members of the community.

**7. Please outline what measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? *Include information about the groups of people affected by this proposal. Include how frequently the monitoring will be conducted and who will be made aware of the analysis and outcomes? This should include key decision makers. Include these measures in the Equality Improvement Plan (section 16)***

The results of the consultation will be displayed on the Engage Barnet page for the Disabled Persons Freedom Pass consultation. Further links to the legislation and additional information will be provided here for residents to view.

Additional informative documents will be available to accompany applicant form to provide applicants with information on what evidence Barnet council will accept as proof of a recognised disability.

It is proposed to collect information on the nine protected characteristics at application and renewal stage. It is planned to use this information to monitor for equalities.

Regular monitoring via London Councils CMS system will take place for regular residency checks, entitlement checks and those entering and leaving the borough. Pass holders will be written to in prior to their entitlement awards expiring, ensuring users have sufficient time to obtain updated information to prove their eligibility.

**8. How will the new proposals enable the council to promote good relations between different communities?** *Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.*

The review has built relationships with those who may be affected and in turn this will provide a point of contact for queries and support.

**9. How have employees and residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal?** *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community. Please refer to Table 2*

A formal consultation was carried out for six weeks between 26 September 2016 - 4 November 2016 which endorsed the councils approached and where possible that feedback has influenced the proposals.

The consultation results show that on average 53% of respondents supported the changes for each of the categories of disabilities. These results include the views from service users, residents, third sector groups and organisations and community groups.

Of those who responded to the consultation 80% (238 out of 376) were Disabled Persons Freedom Pass holders.

Based on the consultation results on the methods used for accessing the service, further improvement to documents, alternative formats and monitoring will be carried out. Improved forms and guidance will be developed with users to ensure to service is

The consultation was advertised online at Engage Barnet(link), local media, Twitter and Facebook, as well as which were distributed to voluntary organisations, Housing Estates, Police Stations, Libraries and prominent London Borough of Barnet Buildings and adult day centres.

All Disabled Persons Freedom Pass holders were written to inviting them to take part in the consultation.

To ensure stakeholders and residents had sufficient levels of support, library drop-in sessions were held to explain the proposals in detail and provide additional support in completing the questionnaire.

The table below shows the dates and times of the library drop-in sessions.

Location	Date	Times
Hendon Library	30 September 2016	10am - 12pm 2 - 4pm

<b>North Finchley Library</b>	<b>3 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Chipping Barnet Library</b>	<b>11 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Burnt Oak Library</b>	<b>19 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Golders Green Library</b>	<b>27 October 2016</b>	<b>10am - 12pm 2 - 4pm</b>
<b>Edgware Library</b>	<b>3 November 2016</b>	<b>10am - 12pm 2 - 4pm</b>

Third sector organisations and community groups were also invited to take part in the consultation and other key stakeholders. The groups shown in the table below accepted the opportunity for the team to meet with them or at a prearranged group meeting.

<b>Name of Organisation</b>	<b>Date</b>
Community Barnet	19/09/2016
Barnet African Caribbean Association	20/09/2016
Barnet Older Asian Association	20/09/2016
Barnet Voice for Mental Health	20/09/2016
Barnet People's Choice	20/09/2016
Age UK	06/10/2016
Mencap	10/10/2016
Met Police	10/10/2016
Inclusion Barnet	11/10/2016
Barnet Asian Elders Association	13/10/2016
Space 2 B	28/10/2016
Barnet Voice for Mental Health AGM	31/10/2016
Volunteering Matters	02/11/2016
Learning Disability Parliament	03/11/2016

## Overall Assessment

10. Overall impact		
Positive Impact  <input type="checkbox"/>	Negative Impact or Impact Not Known <sup>1</sup>  <input checked="" type="checkbox"/>	No Impact  <input type="checkbox"/>

11. Scale of Impact		
Positive impact:  Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known  Minimal <input checked="" type="checkbox"/>  Significant <input type="checkbox"/>	

12. Outcome			
No change to decision  <input checked="" type="checkbox"/>	Adjustment needed to decision  <input type="checkbox"/>	Continue with decision <i>(despite adverse impact / missed opportunity)</i>  <input type="checkbox"/>	If significant negative impact - Stop / rethink  <input type="checkbox"/>

<sup>1</sup> 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

**13. Please give full explanation for how the overall assessment and outcome was decided.**

Satisfied that the revised criteria, applications and renewals process have achieved the project objective of a fair and robust process. The review should result in positive change for most of the applicants and pass holders. It has also highlighted a potential minimal negative impact for people with autism and mental health conditions if they are unable to demonstrate that they meet the new eligibility criteria.

All pass holders will be reassessed when the new proposals are implemented and advised on the evidence required for continuing eligibility. Where people no longer meet the eligibility criteria they will be advised of the appeal process and all action will notified to them in an appropriate manner. Any change in eligibility will be communicated on a one-to-one basis with existing pass holders.

The proposed application and renewals process is justified because it/is

- Meets the government requirements
- Subject to full consultation which reflects the diversity of disabilities in the pas holders
- Uses evidence to identify any potential negative impacts
- Adopts a sensitive and supportive approach with pass holder's to explore continuing eligibility

Therefore no change is required to the recommendation to adopt the proposed new applications and renewals process.

### 14. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Fair and robust process	Monitor applications and rejections collect and record evidence by the nine protected characteristics	Whether certain groups are negatively impacted	CSG	Process begins: April 2017
	Everyone will be reassessed when the new proposals are implemented and advised on the evidence required for continuing eligibility. Where people no longer meet the eligibility criteria they will be advised of the appeals process and all action will notified to them in an appropriate manner. Any change in eligibility will be discussed on a one-to-one basis with existing pass holders	To demonstrate a fair and consistent process	CSG	Process begins: April 2017
Make people aware of the new process	Web page, stakeholder and community notifications	Promoting knowledge and awareness of the new system		December 2016 – April 2017
Fair and accessible treatment for people with disabilities	Enhanced disability awareness for staff operation the new arrangements	To treat disabled customers equally making any adjustment required	CSG	Begin December 2016 fully implemented before the new arrangements

<p><b>1<sup>st</sup> Authorised signature (Lead Officer/Project Sponsor)</b></p>  <p><b>Sam Pandya</b></p>	<p><b>2<sup>nd</sup> Authorised Signature (Service lead/Project Manager)</b></p>  <p><b>Jamie Blake</b></p>
<p><b>Date: 18/11/2016</b></p>	<p><b>Date: 18/11/2016</b></p>

	<p align="center"><b>Policy and Resources Committee</b> <b>1<sup>st</sup> December 2016</b></p>
<p align="center"><b>Title</b></p>	<p align="center"><b>North Central London Sustainability and Transformation Plan</b></p>
<p align="center"><b>Report of</b></p>	<p>Adults and Health Commissioning Director, Dawn Wakeling,</p>
<p align="center"><b>Wards</b></p>	<p>All</p>
<p align="center"><b>Status</b></p>	<p>Public</p>
<p align="center"><b>Urgent</b></p>	<p>No</p>
<p align="center"><b>Key</b></p>	<p>No</p>
<p align="center"><b>Enclosures</b></p>	<p>Appendix A: North Central London Sustainability and Transformation Plan (Full)  Appendix B: North Central London Sustainability and Transformation Plan (Summary)</p>
<p align="center"><b>Officer Contact Details</b></p>	<p>Adults and Health Commissioning Director, Dawn Wakeling Email: <a href="mailto:dawn.wakeling@barnet.gov.uk">dawn.wakeling@barnet.gov.uk</a> Tel: 0208 359 6474</p>

### Summary

This is an update on the progress of the North Central London Sustainability and Transformation Plan (NCL STP) which covers the five London boroughs of Barnet, Camden, Enfield, Haringey and Islington. The draft Sustainability and Transformation Plan (STP) has been produced by all the main healthcare organisations, with input from council officers, within North Central London. It sets out plans to provide high quality and sustainable services in the years to come. The draft NCL STP was submitted to NHS England on the 21 October 2016 and all councils in NCL published the STP for local consultation. The STP remains a draft plan, subject to NHS England approval, and the Committee's views are sought.

### Recommendations

- 1. That the Committee comments on the North Central London Sustainability and Transformation Plan.**

## 1. WHY THIS REPORT IS NEEDED

- 1.1 In December 2015, the NHS shared planning guidance 16/17 – 20/21 outlined a new approach to help ensure that health and care services are built around the needs of local populations. Every health and care system has been working together to produce a multi-year Sustainability and Transformation Plan (STP), showing how local services will evolve and become sustainable over the next five years – ultimately delivering the NHS England “Five Year Forward View” vision.
- 1.2 Local health and care systems have come together in STP ‘footprints’ with Barnet included in the North Central London sub-regional area. The health and care organisations within these geographic footprints have worked together to narrow the gaps in the quality of care, their population’s health and wellbeing, and in NHS finances.
- 1.3 The draft Sustainability and Transformation Plan (STP) is a reflection of the current position in NCL. NCL Councils have published the draft NCL STP on their websites. The draft NCL STP was published on Barnet Council’s website on the 26 October 2016<sup>1</sup> and residents will be able to comment via Engage Barnet.
- 1.4 The vision for health is for North Central London to be a place with the best possible health and wellbeing, where no one gets left behind.
- 1.5 The clinical case for change within the STP describes the changing health and care needs of local people and the key issues facing health and care services in North Central London.
- 1.6 To support delivery of the vision for the STP and address the clinical case for change a programme of transformation has been designed with four aspects (quoted from STP strategic narrative page 16):
  - Prevention: We will increase our efforts on prevention and early intervention to improve health and wellbeing outcomes for our whole population;
  - Service transformation: To meet the changing needs of our population we will transform the way that we deliver services;
  - Productivity: We will focus on identifying areas to drive down unit costs, remove unnecessary costs and achieve efficiencies, including working together across organisations to identify opportunities to deliver better productivity at scale;
  - Enablers: We will build capacity in digital, workforce, estates and new commissioning and delivery models to enable transformation.
- 1.7 Delivering these plans should result in improved outcomes and experience for the local population, increased quality of services and significant savings.

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<sup>1</sup> NCL STP can be accessed on the Council’s website: <https://www.barnet.gov.uk/citizen-home/news/Sustainability-and-Transformation-Plan.html>

- 1.8 The draft STP submitted on 21 October 2016 showed an overall £75m deficit in 2020/21 across NHS organisations. A number of areas for further work by NHS organisations have been identified where additional savings may be found to address this residual gap.
- Emergency surgery (out of hours)
  - Maternity services, in the context of the Better Births initiative
  - Elective orthopaedics
  - Mental health crisis care and place of safety
  - Mental health acute inpatient services
  - Histopathology
  - General dermatology services.
- 1.9 To ensure overall delivery as a system, a governance structure is being developed to enable NHS and local government partners to work together in new ways to drive implementation. All NCL local authorities have expressed publically the need for strong democratic decision making in the STP.
- 1.10 Among health organisations, work is underway to ensure that the development of the two-year health contracts that are being put in place for 2017/18 - 2018/19 are consistent with the STP strategic framework.
- 1.11 The draft North Central London Sustainability and Transformation Plan:
- The health and social care landscape, and its complexity;
  - The understanding of the challenges faced through the clinical case for change;
  - The vision for health and care in NCL in 2020/21;
  - The plans to deliver the vision and address the challenges, and the delivery framework that will enable implementation of those plans;
  - The impact expect to be achieved through the delivery of the plans;
  - Supporting governance arrangements;
  - Plans for securing broader public support and engagement with the STP proposals;
  - Next steps for further developing proposals and responding to the residual financial gap.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 The STP guidance highlights that success requires the engagement of all partners across a local system. The guidance encourages STPs to build on the work of the local Health and Wellbeing Boards, including local needs assessments and Joint Health and Wellbeing Strategies.
- 2.2 A motion with an amendment, agreed by all parties, at Full Council on 1 November 2016 asked for open discussion and scrutiny of the STP by the Health and Wellbeing Board, the Health Overview and Scrutiny Committee and Policy and Resources Committee. It was also agreed that the Leader of the Council and the Leader of the Opposition would write together to the Secretary of State for Health to call for more meaningful local political involvement at the earliest stage in the integration of health and social care and the response to the financial and demographic challenges being faced.

- 2.3 The Health and Wellbeing Board, at its meeting on 10 November, considered the North Central London Sustainability and Transformation Plan as a substantial item. During the debate, the Chairman expressed a number of concerns including:
- The lack of both political and resident involvement in the formulation of these plans. The STP had been produced by all the main healthcare organisations and Local Authorities within NCL but involvement has been limited to officers and has not included elected Members
  - Proper and adequate investment in social care which is crucial to the success of these plans – especially providing care outside of hospital and closer to home
  - The important inclusion of prevention as a guiding principle but there is no detail about maintaining and essentially increasing financial investment for prevention
  - With regards to commissioning and delivery models, these should only be entertained on the basis of proven clinical and safety need.
  - Ensuring that where service changes are proposed, the existing services will remain until their replacements are up and running safely and efficiently.
- 2.4 On the 28 September 2016, the five Local Authority Leaders wrote to Dr Anne Rainsbury of NHS England voicing their extreme concern as “the lack of public transparency and involvement in the development of the plans to date” and “the lack of meaningful political involvement in the STP process.” Dr Anne Rainsbury has contact the Local Authority Leaders to arrange a meeting.
- 2.5 The NCL STP was also considered at the Joint Health Overview Scrutiny Committee on 25 November 2016.
- 2.6 Presenting the STP to the Committee allows for a discussion about engagement and consultation.
- 2.7 The NCL STP is currently being reviewed by NHS England. Health organisation have now been given permission to publish the STP plan.

### **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 Not applicable in the context of this report.

### **4. POST DECISION IMPLEMENTATION**

- 4.1 There is a need for the health and care system to develop plans in more detail and for full engagement with people who use services and the public to ensure those plans are reflective of their needs. The timescale for final

approval of the draft NCL STP by NHS England was not known at the time of writing.

4.2 The Committee will receive further reports at future meetings.

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

5.1.1 The requirement for STPs came out of the NHS shared planning guidance 16/17 – 20/21 and supports the delivery of the Five Year Forward View.

5.1.2 The STP reflects local and sub-regional need and builds on local needs assessments.

### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

5.2.1 The NCL STP (appendix 1) outlines that there is a substantial financial challenge facing health organisations in NCL; the health system is already in deficit and, if nothing changes, this will worsen over the next 5 years to a c.£900m deficit by 2021. Local authorities are also facing significant financial pressures due to demographic changes and policy inflation: by 2020/21 the combinations of pressures and continued loss of funding will result in a projected NCL level social care budget gap of c.£300m.

5.2.2 STP does not close the NHS financial gap. It projects an overall NCL deficit position of NHS organisations of £75m in 2020/21.

5.2.3 STPs bring together local health and care leaders, organisations and communities together to develop local blueprints for improved health, care and finances over the next five years.

### **5.3 Social Value**

5.3.1 The Public Services (Social Value) Act 2013 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

### **5.4 Legal and Constitutional References**

5.4.1 The Terms of Reference for the Policy and Resources Committee are set out in the Council's Constitution (Responsibility for Functions, Appendix A). The Policy and Resources Committee responsibility includes 'To be responsible for the overall strategic direction of the Council including Strategic partnerships'.

### **5.5 Risk Management**

5.5.1 N/A

### **5.6 Equalities and Diversity**

5.6.1 All public sector organisations and their partners are required under s149 of

the Equality Act 2010 to have due regard to the need to:

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.6.2 The protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex and sexual orientation.

## 5.7 Consultation and Engagement

5.7.1 A public consultation event was held on the 27 September 2016 in Barnet organised by the NCL STP. Ten residents attended to feed in their views including local Councillors.

5.7.2 Residents are able to comment on the proposals via the NCL Project Management Team or locally via Engage Barnet.

5.7.3 A programme of further public consultation is being developed by the NCL STP.

## 5.8 Insight

5.8.1 The STP has used local Joint Strategic Needs Assessments and Case for Change information.

## 6. BACKGROUND PAPERS

1.1 The Health and Wellbeing Board have considered the STP at its meetings in November, September and July 2016. The papers and minutes of these meetings can be found on Barnet's website:

<https://barnet.moderngov.co.uk/ieListMeetings.aspx?CIId=177&Year=0>

1.2 Administration Motion in the name of Cllr Richard Cornelius – STPs and local political involvement in health and social care integration; Full Council, 1 November 2016, item 15.4:

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CIId=162&MIId=8816&Ver=4>

1.3 Amendment in the name of Councillor Phil Cohen, Full Council, 1 November 2016, item 15.4:

<https://barnet.moderngov.co.uk/documents/s35806/Amendment%20in%20the%20name%20of%20Cllr%20Phil%20Cohen.pdf>

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# North Central London Sustainability and Transformation Plan

21 October 2016

DRAFT

## Key information

**Name of footprint and number:** North Central London, no. 28

**Nominated lead of the footprint:** David Sloman, Chief Executive, The Royal Free NHS FT

**Organisations within footprint:**

CCGs: Camden, Barnet, Islington, Haringey, Enfield

LAs: Camden, Barnet, Islington, Haringey, Enfield

Providers: Barnet, Enfield and Haringey Mental Health NHS Trust, Camden and Islington NHS FT, Central London Community Healthcare NHS Trust, Central and North West London NHS FT, Moorfields Eye Hospital NHS FT, North Middlesex University Hospital NHS Trust, Royal Free London NHS FT, Royal National Orthopaedic Hospital NHS Trust, Tavistock and Portman NHS FT, University College London Hospitals NHS FT, Whittington Health NHS Trust

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## 1 Foreword

Welcome to the Sustainability and Transformation Plan (STP) for the health and social care services that serve the population of North Central London (NCL). The aim of the STP is to ensure NCL is a place with the best possible health and wellbeing, where no one gets left behind.

This STP is a work in progress and we welcome your comments and input as we further develop the plans.

For the first time, we have come together as health and social care partners to plan how we will deliver excellent, future-proofed services for our local population over the next 5 years.

We know that the health and social care needs of our local people are changing, and that there are serious issues facing health and care services in NCL. People receive different care depending on where they go to obtain it: waiting times for services and health outcomes vary, and the quality of care and people's experience of health and social services is sometimes not as good as it could be.

On top of this, our financial situation remains challenging. Demand for health and social care continues to grow year on year and the growth in demand is running faster than the growth in funding. If we do nothing, we estimate that we would face an unprecedented financial gap in relation to health services alone of nearly £900m in NCL by 2020/21. In addition, as is well known, the trend is for people to live longer and in turn this is creating pressure on social care services and funding.

We believe the best approach to meeting these challenges is to work together to tackle them head on, working together to find solutions at scale and aligning as a system around the interests of local people rather than solely focusing on our individual organisations. It takes time to build relationships and trust in the context of a system that is fragmented and under increasing pressure, but we are committed to this joint endeavour across the whole partnership.

The STP sets out our commitment to transforming care to deliver the best possible health outcomes for our local population; shifting our model of care so that more people are cared for in out of hospital settings - through prevention, more proactive care, and new models of care delivery – and reducing reliance use of secondary care. We have made significant progress in developing our specific ideas for how we will achieve this. We have set up 13 different workstreams and have worked hard on these over the last few months to develop thinking, building on evidence and involving hundreds of members of staff drawn from every organisation in NCL. We have held public meetings in each of the boroughs to start to develop a dialogue with the local community, although we recognise there is much more to do on engagement in the months ahead.

The plan sets out a mixture of both radical service transformation and incremental improvements we believe we need to make in order to deliver real benefits for our population: increasing the emphasis on prevention; shifting care closer to home to reduce demand on hospitals; reducing variation in quality; improving productivity and reducing waste.

But the plan as it stands does not have all the answers. There are some parts of the plan which we have not had time to develop in detail that require significantly more work. We recognise the sheer scale of the changes that we set out currently in the plan will stretch our capacity to deliver, so we need to stress test the plan to ensure we focus on the most important improvement first. And fundamentally the plan does not yet balance the finances, either next year or by 2020/21. Unless we can do so, we will not be able to afford all of the investments and improvements we aspire to deliver. As a result we know that we may face some really tough decisions about where we can invest for improvement and where we will need to prioritise or make choices.

We need to resolve these questions between now and Christmas. We will ensure we are prioritising the areas which will add the most value (in terms of increasing health and wellbeing for people; improving the quality of care people receive; and ensuring value for tax payers' money) to focus our energies on achieving maximum benefit. This will include trying to attract as much investment into NCL as possible. We will continue to develop further ideas in the parts of the plan which are not fully developed. And we will review the phasing of our specific priorities for the first 2 years of our plan in the context of the significant financial challenge we face, seeking specifically to identify areas where we can go further and faster, and areas where we can defer our investment or effort.

We recognise there is much more work to do, and it is crucial that our local residents are involved in this. We are at the beginning of truly transforming care for our population, which will require significant input and contribution from the people who use services in NCL. We look forward to working with our local population to make designing and implementing the plan a success as it evolves.

## 2 Executive summary

There are some excellent health and care services in North Central London (NCL). However, services are not consistent and there are examples of poor practice. We also face significant challenges over the next five years and need to shift our model of care so that more people are cared for in out of hospital settings. This Sustainability and Transformation Plan (STP) has been produced by all the main healthcare organisations and local authorities within NCL. It sets out how we are planning to meet the challenges we face and deliver high quality and sustainable services in the years to come.

We know from our track record that we have the capability to deliver excellent services and to deliver significant change. However, we are not currently able to deliver services across NCL consistently to the standards we would like. We also face a number of significant challenges around the health and wellbeing of local people; and the care and quality of our services. Our current system is focussed on dealing with illness, rather than orientated to prevention and helping people to live well. There is a substantial financial challenge facing health organisations in NCL; the health system is already in deficit and, if nothing changes, this will worsen over the next 5 years meaning that by 2020/21 we estimate we will be c.£900m in deficit. Local authorities are also facing significant financial pressures due to demographic changes and policy inflation: by 2020/21 the combinations of pressures and continued loss of funding will result in a combined social care budget gap of c.£300m.

Our vision is for NCL to be a place with the best possible health and wellbeing, where no one gets left behind. To deliver on our vision, we have designed a programme of transformation with 4 fundamental aspects:

1. **Prevention:** We will increase our efforts on prevention and early intervention to improve health and wellbeing outcomes for our whole population.
2. **Service transformation:** To meet the changing needs of our population we will transform the way that we deliver services.
3. **Productivity:** We will focus on identifying areas to drive down unit costs, remove unnecessary costs and achieve efficiencies, including working together across organisations to identify opportunities to deliver better productivity at scale.
4. **Enablers:** We will build capacity in digital, workforce, estates and new commissioning and delivery models to enable transformation.

Delivering these plans will result in improved outcomes and experience for our local population, increased quality of services and significant savings.

Despite this, we currently expect that the overall financial position of NHS organisations will be a £75m deficit in 2020/21. We have identified a number of areas for further work between now and Christmas where we believe there may be additional savings to be found that would address this residual gap.

To ensure we are able to deliver as a system, building on the progress we have made to date we will develop a robust governance structure which enables NHS and local government partners to work together in new ways to drive implementation. We will put in place dedicated resources to support delivery. It is crucial that whole system is aligned around delivery of the STP and we will ensure that the development of the 2 year health contracts that are being put in place for 2017/18 - 2018/19 are consistent with the STP strategic framework.

We recognise there is more work to do to finalise the granular detail of our delivery plans and address the residual challenge we are forecasting. To develop our plans in more detail we want to fully engage people who use services and the public in our thinking to ensure they are reflective of their needs. We are committed to being radical in our approach, focusing on improving population health and delivering the best care in London. Our population deserves this, and we are confident that we can deliver it.

DRAFT

### 3 Context

North Central London (NCL) comprises five Clinical Commissioning Groups (CCGs): Barnet, Camden, Enfield, Haringey and Islington, each of which is coterminous with the local London Boroughs. Approximately 1.45m<sup>1</sup> live in the 5 boroughs. We spend c.£2.5bn on health and c.£800m<sup>2</sup> on adult and children's social care and public health. The population is diverse and highly mobile, with a large number of people living in deprivation<sup>3</sup>.

There are four acute trusts within NCL: The Royal Free London NHS Foundation Trust (sites include Barnet Hospital, Chase Farm Hospital and the Royal Free Hospital in Hampstead), University College London Hospitals NHS Foundation Trust, North Middlesex University Hospital NHS Trust, and Whittington Health NHS Trust. There are two single specialist hospitals: Moorfields Eye Hospital NHS Foundation Trust and the Royal National Orthopaedic Hospital NHS Trust. Great Ormond Street Hospital for Children NHS Foundation Trust is within the NCL geography, but currently out of the scope of the STP. Community services are provided by Central and North West London NHS Foundation Trust, the Whittington Health NHS Trust, and Central London Community Healthcare NHS Trust.

Mental health services are provided by the Tavistock and Portman NHS Foundation Trust, Camden and Islington NHS Foundation Trust and Barnet, Enfield and Haringey Mental Health NHS Trust. There are 220<sup>4</sup> GP practices, and the out-of-hours services contract was recently awarded to the London Central and West Unscheduled Care Collaborative. There are 497 active social care sites registered across NCL, including 273 registered care homes (47 of which provide nursing)<sup>5</sup>. Care homes are particularly high in numbers in the north of NCL, for example in Enfield where there are 97 registered care homes (in contrast to the 12 care homes registered in Camden)<sup>6</sup>. In addition, there are 214 registered domiciliary care providers<sup>7</sup>.

The organisation of services in NCL makes the area quite unique and this has ramifications for planning: there is a particularly high concentration of specialised services across multiple providers covering a small geographic area. This means many of the patients treated in NCL do not live in NCL and consequentially, a large proportion of the income paid to our providers comes from commissioners outside of the area.

As individual organisations in NCL, we have a history of working together in different ways to meet the needs of our population, and there are numerous excellent examples of collaboration as a result. However, working collectively across all organisations remains a relatively new endeavour and we continue to build the trust required to enable us to do so.

<sup>1</sup> ONS, Mid-year population estimates, 2015

<sup>2</sup> 2015/16

<sup>3</sup> Office for national statistics, IMD 2015

<sup>4</sup> Latest figures from NHS England, updated since publication of the NCL case for change

<sup>5</sup> Local Authority Care Quality Commission reports, 2016

<sup>6</sup> Local Authority Care Quality Commission reports, 2016

<sup>7</sup> Local Authority Care Quality Commission reports, 2016

We are home to 4 national Vanguards: The Royal Free London NHS Foundation Trust is developing a provider chain model; University College London Hospitals NHS Foundation Trust Vanguard is focused on what can be done to improve the end-to-end experience for people with cancer; Moorfields Eye Hospital NHS Foundation Trust is developing an ophthalmology specialty chain; and, the Royal National Orthopaedic Hospital NHS Trust is one of 13 partners developing a UK-wide chain of orthopaedic providers. NCL is also home to two devolution pilots: one seeking to optimise the use of health and social care estate, and another focused on prevention in Haringey. In primary care, GP practices are already working together in a number of GP Federations to provide extended services to our residents.

In NCL, every borough has its own unique identity and local assets we can build on. Many people lead healthy lives, but if they do get sick we can offer some of the best care in the country. We have a reputation for world class performance in research and the application of innovation and best practice, and we can harness the intellectual capacity of our workforce to ensure the best outcomes are delivered. There are many examples of excellent practice across health and social care in our area, which we intend to use to help ensure that excellent practice can be offered to all our residents.

Our track record demonstrates that we have the capability to deliver excellent services and also to significantly change our services when needed. Our ambition is that everyone is able to get the care they need when they need it. This means ensuring people have the best start in life, and supporting them to live healthy lives. When people do need specialist care, we want them to be able to access it quickly and in the most appropriate setting, and to be fully supported to recover in the setting most suited to their needs.

However, we are not consistently delivering our ambition to the standards we would like. We face significant challenges around the health and wellbeing outcomes for our population, the quality of our services and the financial sustainability of the health and care system. These are outlined in this document and set out in more detail in our case for change<sup>8</sup>.

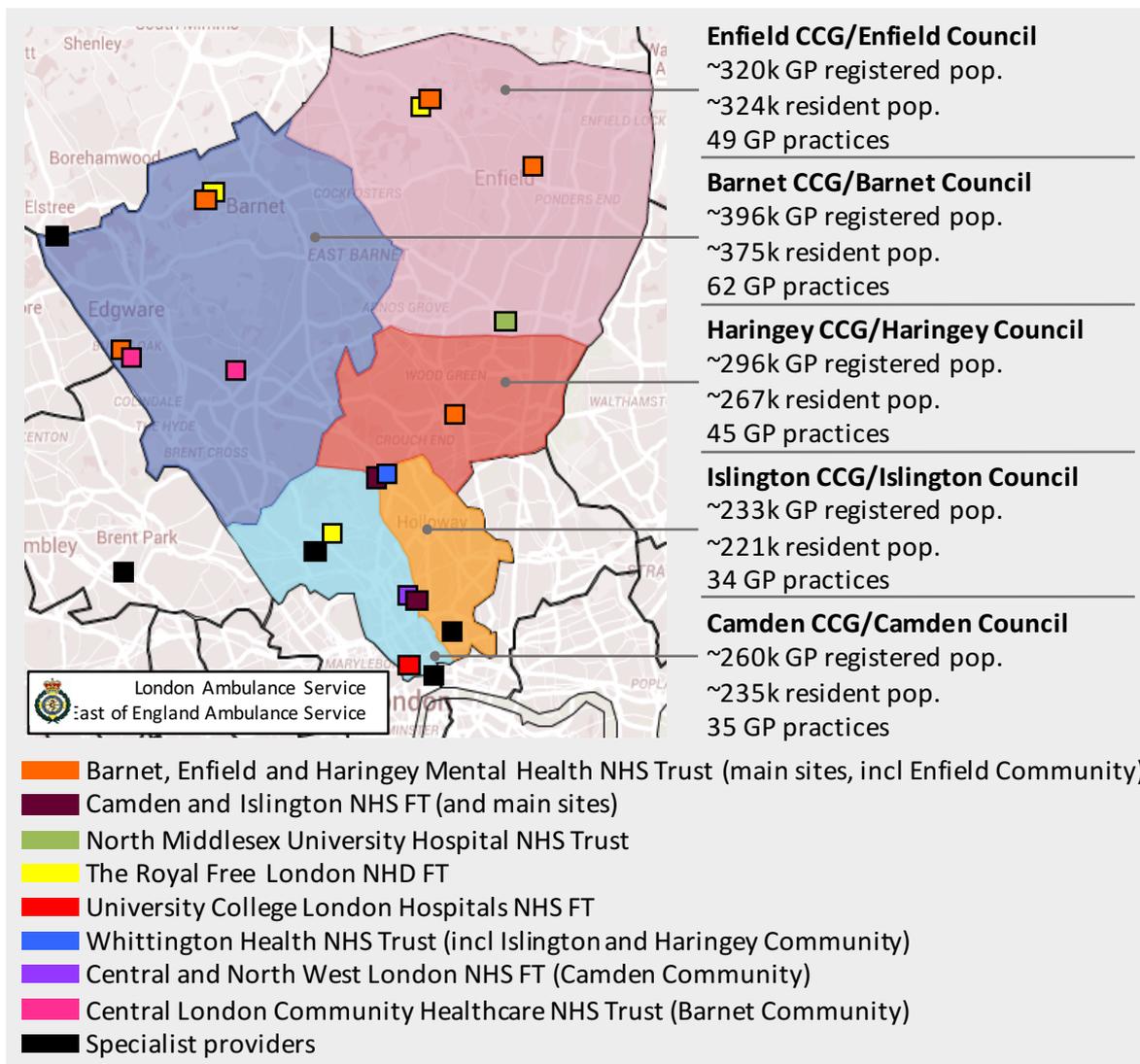
The national requirement to produce an STP is an opportunity for the NCL system to address these challenges together and widen the scope of our collaborative working. This document articulates:

- our collective understanding of the challenges we face
- our vision for health and care in NCL in 2020/21
- the plans to deliver on our vision and address the challenges
- the delivery framework which will enable us to implement our plan
- the impact we expect to achieve through the delivery of our plans
- our plans for securing broader public support and engagement with our proposals
- our next steps for further developing proposals and responding to our residual financial gap.

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<sup>8</sup> <https://www.uclh.nhs.uk/News/Documents/NCL%20case%20for%20change.September%202016.pdf>

Exhibit 1: Overview of NCL



Source: Population figures from 2014 ONS data.

## 4 Case for change: our challenges and priorities

In NCL we share many of the same challenges faced by health and care organisations across the UK (and indeed internationally). We have undertaken significant work to identify, articulate and quantify the specific gaps in health and wellbeing; care and quality; and our baseline financial position. Across the system we have aligned behind this work and we all agree on the nature and scale of the challenge, which we have described in our [case for change](#) which was published in September 2016.

### 4.1 Health and wellbeing gap

We have a diverse and highly mobile population. There are people from a range of Black and Minority Ethnic (BME) groups: these groups have differing health needs and health risks. A quarter of our local people do not have English as their main language<sup>9</sup>, which creates challenges for the effective delivery of health and care services. The mobility of our population, with 8% of local people moving into or out of NCL each year<sup>10</sup>, has a significant impact on access to services and delivery.

Poverty is a crucial determinant of health, and is widespread among both adults and children living in the boroughs that make up NCL<sup>11</sup>. Significant inequalities exist, which need to be addressed; for example, men in the most deprived areas of Camden live on average 10 years fewer than those in the least deprived areas<sup>12</sup>. We face challenges in addressing other wider determinants of health, for example, there are high levels of homelessness and households in temporary housing with all five boroughs in the top 10% for number of households in temporary accommodation<sup>13</sup>. Social isolation also remains a critical issue across the sub-region.

The children of NCL do not always get the best start to life. 30% of children grow up in child poverty and 6% live in households where no one works. 60 children take up smoking every day<sup>14</sup>. Although there have been some improvements recently, London as a whole has the highest rates of obesity nationally: 1 in 3 children are obese in Year 6 (age 11) and we need to do more to tackle this, particularly working with the schools in NCL<sup>15</sup>. Although many of our residents are healthy and people are living for longer, good health does not always persist into old age. Our older people are living the last 20 years of their life in worse health than the England average<sup>16</sup>.

Almost half of people in NCL have at least one lifestyle-related clinical problem (e.g. high blood pressure) that is putting their health at risk<sup>17</sup>. However, they have not yet developed

<sup>9</sup> NCL case for change, 2016

<sup>10</sup> ONS mid-year population estimates 2014

<sup>11</sup> Census 2011

<sup>12</sup> IMD 2015, ONS

<sup>13</sup> <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

<sup>14</sup> CENSUS 2011

<sup>15</sup> Public health outcomes framework tool, 2015

<sup>16</sup> Office for National Statistics, HSCIC CCG Indicators, 2014-15

<sup>17</sup> Camden and Islington GP Linked Dataset projected to NCL level

a long term health condition. Many of these lifestyle-related clinical problems are risk factors for NCL's biggest killers - circulatory diseases and cancer. These diseases are also the biggest contributors to the differences which exist in life expectancy.

There are high rates of mental illness amongst both adults and children in NCL<sup>18</sup>, and many conditions go undiagnosed<sup>19</sup>. 50% of all mental illness in adults begins before 14 years of age and 75% by 18<sup>20</sup>. Children with mothers with mental ill health are much more likely to develop mental health issues themselves. Three of our boroughs have the highest rates of child mental health admissions in London<sup>21</sup> There are high rates of early death amongst those with mental health conditions<sup>22</sup>, particularly in Haringey and Islington, and the rate of inpatient admissions amongst this population is above the national average. A strong focus on mental health is central to our approach with a clear aim of treating mental and physical ill health in a joined up way and with "parity of esteem."

#### 4.2 Care and quality gap

Currently, our system does not sufficiently invest in those people with a life-style related clinical problem, which would help stop them from developing the long term conditions which in aggregate are a huge burden on our health and care system. Only 3% of health and social care funding is spent on public health in NCL<sup>23</sup>, and that is despite evidence showing that between 2012 and 2014 around 20% (4,628) of deaths in NCL could have been prevented<sup>24</sup>. There is a large opportunity in refocusing our efforts towards prevention and making every contact count. This focus should also address the wider determinants of health such as poverty, housing and employment, all of which have a significant impact on individuals' health and wellbeing.

Disease and illness could be detected and managed much earlier, and managed better in community. It is thought that there are around 20,000 people in NCL who do not know they have diabetes, while 13% of the population are thought to be living with hypertension<sup>25</sup>. It is likely that people are being treated in hospital for long term conditions (LTCs) when they could be better managed by individuals themselves with the support of professionals in the community. Many people with LTCs – over 40% in Barnet, Haringey and Enfield – do not feel supported to manage their condition<sup>26</sup>. This would help avoid the high levels of hospitalisation we experience for the elderly and those with chronic conditions.

One of the disease specific challenges we face is in the provision of cancer care. Late diagnosis of cancers is a particular issue, alongside low levels of screening for cancer and low awareness of the symptoms of cancer in some minority ethnic groups. Waiting times to

<sup>18</sup> QOF data 2014/15

<sup>19</sup> NHS England Dementia Diagnosis Monthly Workbook, April 2016

<sup>20</sup> Dunedin Multidisciplinary Health & Development Research Unit. Welcome to the Dunedin Multidisciplinary Health and Development Research Unit (DMHDRU).

<sup>21</sup> Fingertips, 2014/15

<sup>22</sup> Healthy Lives, Healthy People 2010

<sup>23</sup> Based on 2015/16 public health budget of each NCL council

<sup>24</sup> Public Health Profiles Data Tool, PHE, 2012-14

<sup>25</sup> QOF 2014/15

<sup>26</sup> Office for National Statistics, HSCIC CCG Indicators, 2014-15

see a specialist are long, and so are waiting times for diagnostics. Additionally, referrals to specialists have almost doubled in five years. There is a huge shortfall in diagnostic equipment and workforce, and a lack of services in the community, particularly at weekends. A further issue is that some hospitals are seeing small numbers of patients with some types of cancer, in some cases less than two per week.

There are some challenges in primary care provision, however, this is a mixed picture which creates inequity. There are too few GPs in Barnet, Enfield and Haringey, and low numbers of registered practice nurses per person across all areas, but particularly in Camden and Haringey.

There are high levels of A&E attendances across NCL compared to national and peer averages<sup>27</sup>, and very high levels of first outpatient attendances<sup>28</sup>, which indicate potential gaps in primary care provision. Acute providers are not consistently meeting emergency standards.

In the acute setting there are differences in the way that planned care is delivered and this needs to be addressed, with variation based on differences in clinical practice rather than patient need. The number of people seen as outpatients in NCL is high and there is variation in the number of referrals between consultants in the same hospital, the number of follow-up outpatient appointments and the proportion of planned care that is done as a day case.

We are using hospital beds for people who could be cared for at home, or in alternative care settings. 59% of acute bed days are used by people with stays over 10 days, and the majority of these people are elderly. 85% of the mental health bed days in NCL are from patients staying over 30 days. Delayed discharges are also high in some hospitals. Staying longer than necessary in hospital is not good for people's health, especially the elderly whose health and wellbeing can deteriorate rapidly in an acute environment.<sup>29</sup>

We face challenges in mental health provision. People do not always have easy access to information and community based support, and community mental health services are under huge pressure. There is also no high quality health-based place of safety in NCL. Many people receive their first diagnosis of mental illness in Emergency Departments. High numbers of people are admitted to hospital – many under the Mental Health Act. There is variable access to liaison psychiatry, perinatal psychiatry and child and adolescent mental health services (CAMHS) within urgent care: most of the liaison psychiatry and CAMHS services in hospitals in NCL do not see children within one hour at weekends and overnight<sup>30</sup>. There is limited perinatal community service in NCL, in the northern boroughs there is no specialist team and in the southern boroughs the service does not meet national standards<sup>31</sup>.

<sup>27</sup> RightCare Atlas of Variation in Healthcare, September 2015

<sup>28</sup> NHS England Activity Data 2014-15

<sup>29</sup> Philip et al. (2013) Reducing hospital bed use by frail older people: results from a systematic review of the literature. International Journal of integrated care.

<sup>30</sup> Mental health crisis care ED audit, NHS England (London), 2015

<sup>31</sup> Maternal Mental Health Everyone's Business

Our use of information and technology does not currently support integrated health and social care across NCL. There is a variable level of digital maturity across providers and most being below the national average for digital capabilities, particularly their capability to share information with others.

Some of our buildings are not fit for purpose and there are opportunities to use our estates better. 11 sites in NCL have facilities management costs at least 10% more than the Carter benchmark (£319 p sq. m), with a further 3 sites within 10% of the benchmark. 8 sites have a higher proportion of unutilised space than the 2.5% benchmark contained within the Carter report, and over half of the sites analysed were found to have a higher proportion of non-clinical space than the Carter benchmark (35%).

We have significant workforce challenges across health and social care, including a high turnover across a range of professions, an over reliance on agency staff and HR policies which are not transferable across organisations.

There is consensus across the system that the current approach to commissioning and providing health and social care services across NCL could be better aligned to support the implementation of our emerging vision for the STP. In particular, the delivery of a population health approach and genuinely integrated care is significantly constrained by:

- the rigid separation of commissioning and providing responsibilities within the NHS
- the limited existing integration between health and social care
- the fragmentation of providers of health and care into many sovereign organisations
- increased financial risks across CCGs and providers
- stretched capacity and capability in the current organisational form.

We need to design new commissioning and delivery models that enable us to deliver transformed care in a way that is sustainable.

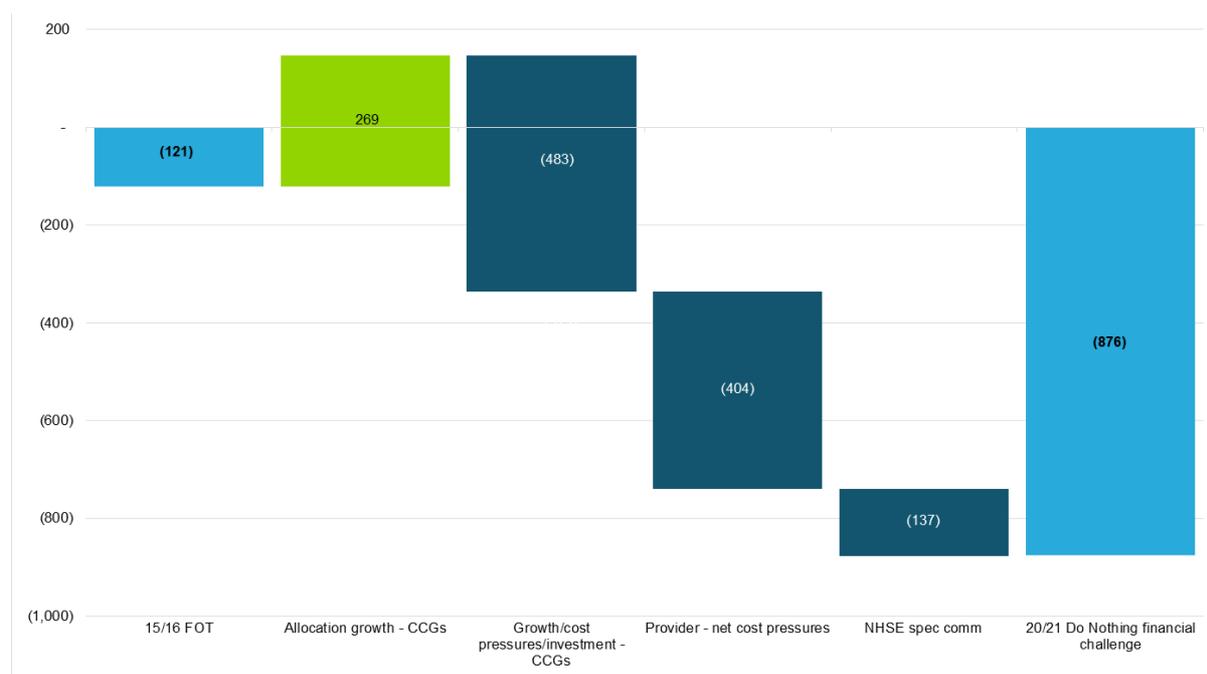
#### 4.3 Baseline financial gap

Our population is growing and demand is rising: people access health care more often, and are – positively – living longer, but often with one or more long term conditions. Meanwhile, the NHS's costs are rising more than inflation across the UK economy (to which allocations are linked). The upshot of this is that not only is the system responding to greater demand, but also that the sum cost of activity is growing faster than allocations.

Put simply, funding increases in NCL of £269m over the next 5 years will not meet the likely increases in numbers of local people and growth in demand for health services of c.£483m, plus increases in the cost of delivering health care of c.£404m.

This means that there is a substantial financial challenge facing health organisations in NCL. Health commissioners and providers were already £121m in deficit in 2015/16 and, if nothing changes, this will grow to £876m in deficit by 2020/21.

Exhibit 2: The 'do nothing' financial gap for NCL



The 'do nothing' specialised commissioning financial challenge is estimated at £137m (this estimate is currently being validated). This excludes Great Ormond Street Hospital NHS Trust and the Royal National Orthopaedic Hospital NHS Foundation Trust which would add a further £49m and £10m respectively. The specialised commissioning challenge is driven by advances in science; an increasingly ageing population with LTCs; and rising public expectation and choice for specialised treatment. In addition there are increasing financial pressures for specialised services, including the increasing volume of expensive new drugs. Spending on specialised services has increased at much greater a rate than other parts of the NHS, and this is expected to continue.

The current combined net budgets for the 5 boroughs in NCL is £760m for Adults and Children's Social Care (CSC) and Public Health services. However, we know that between 2010/11 and 2020/21 the average reduction in borough spending power will be 35%. Adult Social Care (ASC) budget reductions during this period will total at least £154.5m. This reduction in funding requires that a significant savings programme be delivered.

The collective 2016/17 forecast budget pressures for the 5 boroughs in ASC and CSC is £39m (£26m ASC, £13m CSC). Both ASC and CSC will continue face considerable pressures from demographic growth, inflation and increasingly complex care needs. By 2020/21 the combinations of pressures and continued loss of funding will result in a combined social care budget gap of c.£308m, which is equivalent to a 28% reduction on the current Councils' total budget. Councils may have the option to raise a 2% precept for social care in future years, but this will be subject to political agreement and will not come close to closing the gap.

## 5 Vision

***Our vision is for North Central London to be a place with the best possible health and wellbeing, where no-one gets left behind.***

Developing our vision in NCL has taken time, and we have harnessed our high quality clinical and practitioner leadership at every stage of the process. The vision for NCL initially drew on existing local work which was underway before the STP process started. Leaders across the system then iterated the vision at an event in September 2016. This process, alongside the series of borough-based public engagement events in September and October, has ensured that our vision is collectively owned across the system. We are committed to fulfilling our vision through this plan, and have identified a set of core principles to support our ambition.

### Our core principles

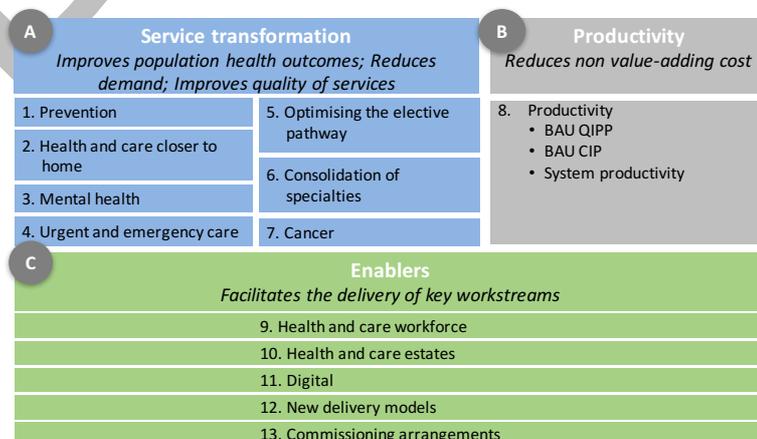
- We will work in a new way as a whole system; sharing risk, resources and reward.
- Health and social care will be integrated as a critical enabler to the delivery of seamless, joined up care.
- We will move from pilots and projects to interventions for whole populations built around communities, people and their needs. This will be underpinned by research based delivery models that move innovation in laboratories to frontline delivery as quickly as possible.
- We will make the best the standard for everyone, by reducing variation across NCL.
- In terms of health we will give children the best start in life, and work with people to help them remain independent and manage their own health and wellbeing.
- In terms of care we will work together to improve outcomes, provide care closer to home, and people will only need to go to hospital when it is clinically essential or economically sensible.
- We will ensure value for tax payers' money through increasing efficiency and productivity, and consolidating services where appropriate.
- To do all of this we will do things radically differently through optimising the use of technology.
- This will be delivered by a unified, high quality workforce for NCL.

## 6 Strategic framework

To deliver on our vision and achieve the triple aim as set out in the Five Year Forward View (to increase health and wellbeing; meet the highest standards of care and quality; and improve productivity and efficiency), we have designed a programme of transformation with 4 aspects:

1. **Prevention:** Much of the burden of ill health, poor quality of life and health inequalities in NCL is preventable. We will increase our efforts on prevention and early intervention to improve health and wellbeing outcomes for our whole population, which will reduce health inequalities, and help prevent demand for more expensive health and care services in the longer term.
2. **Service transformation:** To meet the changing needs of our population we will transform the way that we deliver services. This involves taking a “population health” approach: giving children the best possible start in life; strengthening the offers and provision in the local community to ensure that where possible care can be provided out of hospital and closer to home – reducing pressure on hospital services; rethinking the relationships between physical and mental health to ensure that mental health care is holistic and person-centred; and, reducing variation in services provided in hospital. Social care plays a key role in service transformation.
3. **Productivity:** In order to ensure sustainability, we will focus on identifying areas to drive down unit costs, remove unnecessary costs and achieve efficiencies. For providers, this includes implementing recommendations from the Carter Review and working together across organisations to identify opportunities to deliver better productivity at scale.
4. **Enablers:** We will focus on delivering capacity in key areas that will support the delivery of transformed care across NCL. This includes digital, workforce, estates, and new commissioning and delivery models.

Exhibit 3: The NCL STP strategic framework



## 6.1 Prevention

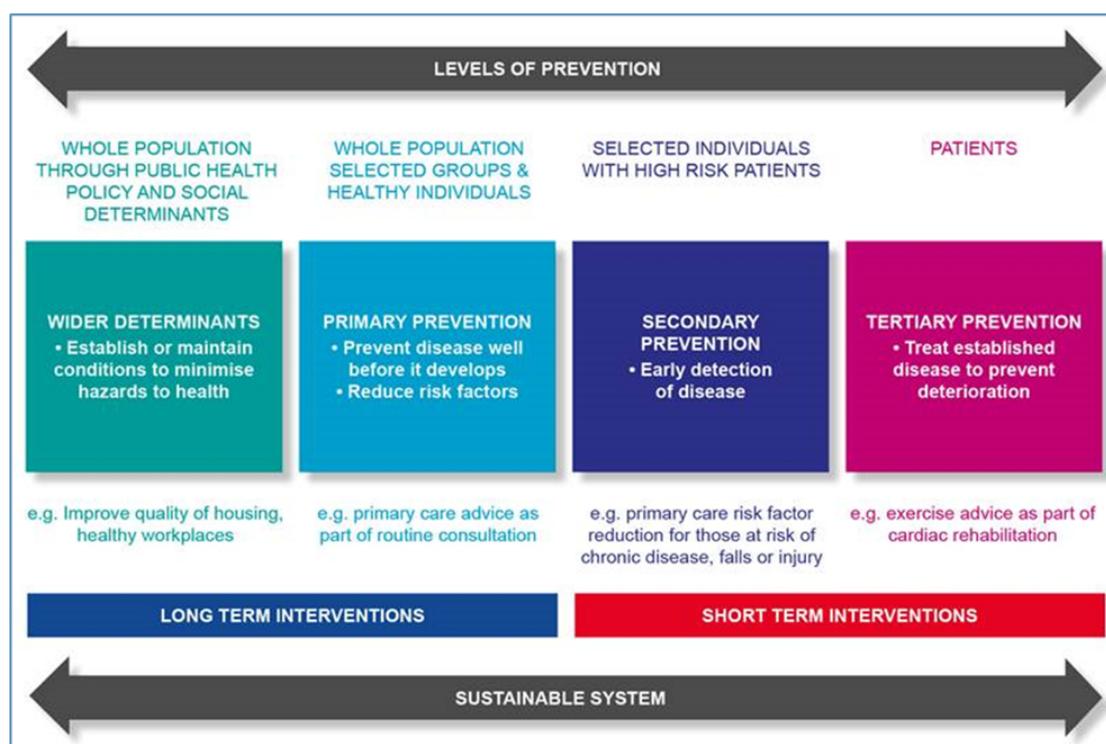
We will embed prevention and early intervention across the whole health and care system and deliver effective preventative interventions at scale. As a result, we will improve population health outcomes and reduce health inequalities by harnessing assets within and across communities for example, from Council services, including social care and the voluntary and community sector. This will positively impacting on the lives of residents, their families, and our communities.

Afrin lives in hostel accommodation and is dependent on alcohol. He experiences seizures almost daily. Afrin has in the past, with support from treatment, managed to gain abstinence but had a relapse which is due to depression brought on by unstable housing and economic circumstances. Afrin has had many unscheduled hospital admissions in the last 6 months. In future, on admission to hospital Afrin will be referred to an alcohol assertive outreach worker (AAOT) by the hospital alcohol liaison worker. This support will enable him to put in place foundations that will help him towards abstinence and recovery. Afrin will be supported to give up drinking, with input from an addictions doctor at a community alcohol service. A slow reduction plan, that is achievable and minimises the risk of seizures which in the past have led to hospital admission, will be put in place. Afrin will have regular 1-2-1 appointments with his AAOT, which will include psychological help.

Our prevention plans focus on interventions and system change across the whole spectrum of prevention (exhibit 4), where there is strong evidence of effectiveness and return on investment within the 5 year period of the STP<sup>32</sup>. In addition, we have identified opportunities where we could rapidly build upon successful local initiatives across NCL to achieve economies of scale.

<sup>32</sup> Interventions have been identified from the Public Health England (PHE) Supporting Pack for STPs and the return on investment work undertaken for Healthy London Partnerships by Optimity.

Exhibit 4: Approach to prevention



We will concentrate our efforts on:

- Creating a 'workforce for prevention'** so that every member of the local public sector workforce in NCL is a champion for prevention.  
*Specific interventions: Making Every Contact Count (MECC); Mental Health First Aid (MHFA); dementia awareness*
- Ensuring that the places where residents and employees live and work promote good health.** This will include: reversing the upwards trend in childhood obesity; supporting people with mental ill health and other long term conditions to stay in work; pioneering new approaches to tackling gambling, alcohol misuse and smoking; and supporting the workforce across NCL (including our own staff) to become healthier.  
*Specific interventions: Haringey Devolution Pilot; improving employment opportunities for people with mental ill health through individual placement support (IPS); Healthy Workplace Charter; Healthy Early Years / Healthy Schools accreditation*
- Supporting residents, families and communities to look after their health: smoking and drinking less, eating more healthily, and being more active, as well as looking after their sexual health and mental health wellbeing.** This will all reduce hospital admissions from preventable causes such as smoking, alcohol, and falls, and reductions in associated ill health and early deaths. We will protect and ensure high quality universal services for vulnerable families by starting direct conversations with schools to proactively identify who these families are, and collaborating to map across primary care, social care, early years, therapies, paediatrics and secondary care. We will ensure that smoking cessation programmes are embedded across

maternity services and services for children and young people, targeting parents and older children. Drawing on the experience of our local authorities in running large scale campaigns, we will design and deliver a campaign across NCL to address a variety of wellbeing or long term conditions through a single preventative message with common NCL branding.

*Specific interventions: smoking cessation; alcohol screening, liaison and outreach teams; weight management programmes; diabetes prevention programme; multifactorial falls intervention; long-acting reversible contraception; community resilience; increased access to mental health services for children and new mothers; London's digital mental health programme.*

- **Diagnosing residents with clinical risk factors and long term conditions much earlier to increase life expectancy.** Once diagnosed, empowering them to manage their own condition(s) alongside proactive management by health professionals to prevent the development of further conditions and complications.

*Specific interventions: increasing awareness and case finding (including national cancer screening and HIV testing) and appropriate medications to control conditions for people with high blood pressure, diabetes, atrial fibrillation; self-care and structured self-management for long term conditions; reablement offers in social care and care navigation.*

We will build upon on the individual strengths that each part of the public sector in NCL can bring to preventing disease and ill health. As well as traditional 'health professionals' this also means working with local authority housing officers and the London Fire Brigade in, for example, preventing falls. We also recognise the key contribution that voluntary and community sector organisations can make in achieving disproportionately greater improvements in health for residents with mental ill health and learning disabilities, specific BME groups, and those in the most deprived communities, and we are committed to working more collaboratively with these organisations.

## 6.2 Service transformation

To meet the changing needs of our population we will transform the way that we deliver services, shifting the balance of care from reactive to proactive. This will be through ensuring people achieve the best start in life, developing our care closer to home model, creating a holistic approach to mental health services, improving urgent and emergency care, optimising the elective pathway, consolidating of specialties where appropriate and transforming cancer services to improve the end-to-end experience. Social care plays a key role in all aspects of service transformation.

### 6.2.1 Achieving the best start in life

Children make up between 25% and 30% of the population across the NCL footprint which means that service transformation must include a specific focus on our children and young people. We recognise that providing children with the best start in life is critical for their development and health long term. We have identified interventions across the pathway,

from prevention to acute care, that are focussed specifically on improving health and outcomes for children and young people.

In the context of a considerable body of research suggesting that fetal exposure to an adverse environment in-utero sets the trajectory for child and adult health in terms of congenital malformations, obesity, diabetes and cardiovascular disease, we will explore ways to link primary care, public health and maternity services to optimise maternal health before, during and after pregnancy. In particular, smoking cessation, weight reduction, optimisation of blood sugar control in diabetics and improvement of diet in women of reproductive age has the potential to reduce the health needs of children. We will leverage the work of our NCL Maternity Network to ensure that our local maternity system implements the findings of the national Maternity review: Better Births. We are keen to take part in the National Maternity Transformation programme as an Early Adopter.

We will promote active travel, sport and play for children in schools, for example involving schools to deliver the *Take 10, Active 15, Walk a daily mile* initiatives that other parts of the country have adopted to support this. By 2020/21, our aim is that 4 out of 5 early years' settings and schools in NCL will be accredited as part of the healthy schools, healthy early years or similarly accredited programme for promoting healthy lives.

Tai, 14, suffers from severe depression. With the involvement of Tai, his family, and his CAMHS practitioners, Tai has been admitted into a Tier 4 unit on a planner basis. Previously, it was likely that Tai would have been placed far from home. In future, with the local commissioning of Tier 4 he will be able to be placed close to home. This will enable better linkage with the local CAMHS community team, which will have also been enhanced. Together, these factors will mean Tai has a better experience of care and stays in hospital for a shorter length of time. When Tai is discharged back into the community, he will have an enhanced care plan to support him to keep well.

We will address mental ill health in children as early as possible: developing antenatal and postnatal interventions for mothers with mental ill health; improving services for parenting support, health visiting, and signposting; and creating targeted services that focus on vulnerable high risk families. We will capitalise on the universal services of MIND, Place2Be and voluntary sector initiatives like *Hope Tottenham* that are already established and working directly with families and young people. As part of our Child and Adolescent Mental Health Services (CAMHS) and perinatal initiative led through the mental health workstream, we will:

1. **Develop a shared dataset for CAMHS** to enable comparison and shared learning across the 5 boroughs
2. **Tackle eating disorders** by establishing dedicated eating disorder teams in line with the waiting time standard, service model and guidance
3. **Upskill our workforce** to meet the mental health and psychological wellbeing needs of children and young people, including developing a children and young people's IAPT workforce capability programme

4. **Build on our Transforming Care initiative** by supporting children and young people with challenging behaviour in the community in order to prevent the need for residential admission
5. **Improve perinatal mental health services** by developing a specialist community perinatal mental health team that serves the NCL population and the physical health acute trusts within NCL
6. **Implement a Child House model** following best practice to support abused children
7. **Create a 24/7 crisis pathway for children and young people**, including local commissioning of Tier 4 CAMHS to eliminate out of area placements for non-specialist acute care by 2020/21; and review of S136
8. **Develop a co-commissioning model for youth justice** working with NHS England.

The principles of THRIVE will be used as an overarching approach to our CAMHS work, with the aim that at least 32% of children with a diagnosable condition are able to access evidence-based services by April 2019 as set out in the Mental Health Taskforce.

### 6.2.2 Health and care closer to home

Health and care will be available closer to home for all, ensuring that people receive care in the best possible setting at a local level and with local accountability. We already have many high quality services outside acute settings across NCL, but our health and care closer to home model will focus on scaling these services up, reducing variation and making this the default approach to care. Social care will play a key role in the design, development and expansion of the future model.

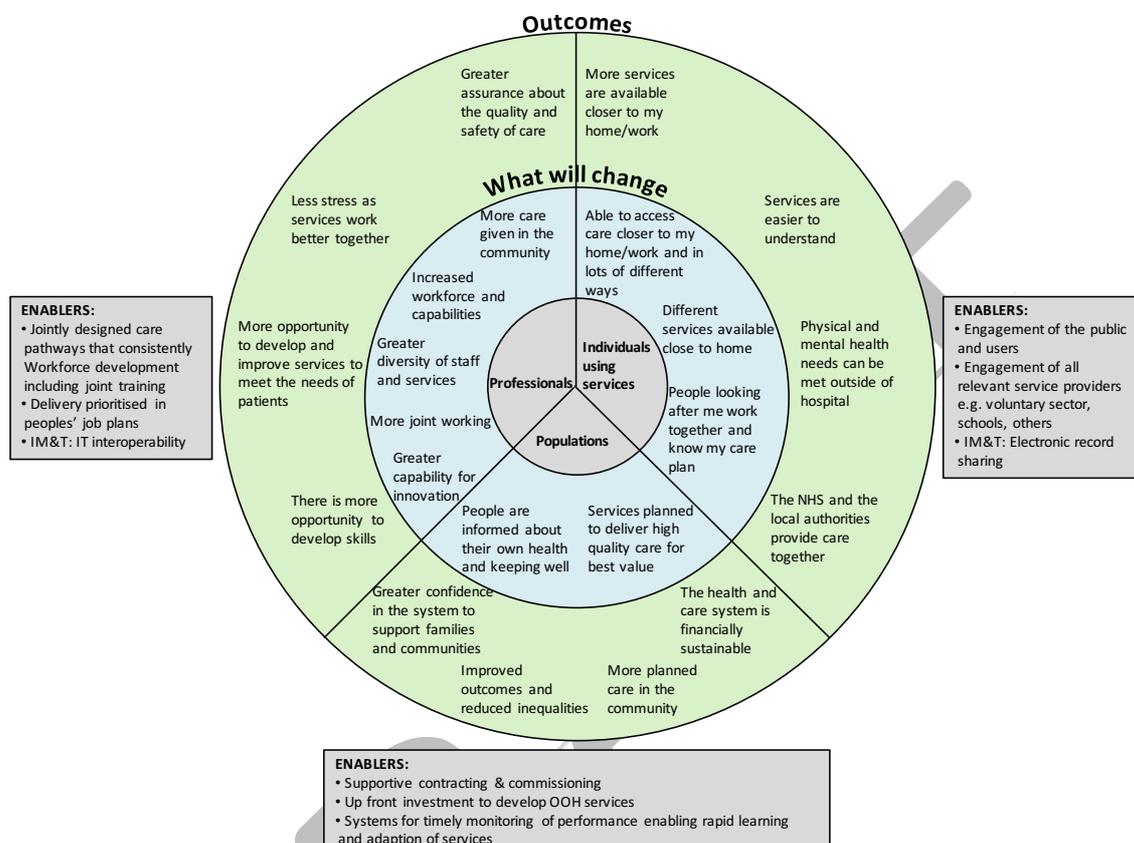
Ms Sahni is 87 and has four chronic health problems. Previously, she had to book separate appointments with different primary care professionals to have all of the relevant check-ups and appointments that she required. In future, Ms Sahni will be in a special “stream” of patients who will have all of their care co-ordinated by a very experienced GP. This will allow her to see the specialist heart or diabetic nurses at the Integrated Care Centre located at her GP surgery. There will also be a care navigator in the team who can help to sort things out for her at home, including community support when she needs it.

We will address the sustainability and quality of general practice, including workforce and workload issues. It is recognised that for some people, health and care being delivered closer to their home is not always the best choice, and therefore high quality hospital-based and care home services will continue to be available when needed.

At the heart of the care closer to home model is a ‘place-based’ population health system of care delivery which draws together social, community, primary and specialist services. This will be underpinned by a systematic focus on prevention and supported self-care, with the aim of reducing demand on the system over time. We will deliver the right care at the right time to the whole population. The care closer to home model is one of the key vehicles by

which we will contribute towards the overall delivery of the Better Health for London outcomes.

*Exhibit 5: Delivery of the Better Health for London outcomes through the health and care closer to home model*



Specific interventions that make up the scope of the care closer to home model include:

- **Developing 'Care Closer to Home Integrated Networks' (CHINs):** CHINs may be virtual or physical, and will most likely cover a population of c.50,000 people. They will be home to a number of services including the voluntary and community sector to provide a more integrated and holistic, person-centred community model, including health and social care integrated multi-disciplinary teams (MDTs), care planning and care coordination for identified patients. Interventions focussed on the strengths of residents, families and communities; improving quality in primary care; and reducing unwarranted variation will also operate from CHINs, including Quality Improvement Support Teams (QIST) to provide hands-on practical help for individual GP practices to ensure a consistent quality standard and offer to all patients. This will include support for case finding and proactive management of high blood pressure, atrial fibrillation and diabetes. We have already piloted CHINs, for example the Barnet Integrated Local Team (BILT)<sup>33</sup> hub which provides coordinated care for older residents with complex medical and social care needs, as well as providing support

<sup>33</sup> Barnet integrated Care Locality Team, 2016

to carers. The BILT hub has been open since April 2016 and is a joint funded health and social care pilot.

- **Extending access to primary care:** patients will be able to access consultations with GPs or other primary care professionals in their local area for pre-bookable and unscheduled care appointments between 8am and 8pm 7 days a week.
- **Supporting healthier choices:** in line with our prevention agenda, the care closer to home model will include upscaling our smoking cessation activities by 9-fold to reduce prevalence and hospital admissions; increasing alcohol screening and the capacity of alcohol liaison services and alcohol assertive outreach teams across NCL; scaling up weight management programmes with integrated physical and wellbeing activities; and reducing unplanned pregnancies by increasing the offer and uptake of long acting reversible contraception.
- **Improving access through technology and pathways:** telephone triage, virtual consultations and online booking systems will be available for all patients.
- **Supporting patients through social prescribing and patient education:** the care closer to home model will include a greater emphasis on social prescribing and patient education. Support will be available for patients, carers and professionals to be confident users of information and IT solutions that enable self-management and care, as well as care navigation support to direct patients to the right services.
- **24/7 access to specialist opinion in primary care:** primary care will be able to provide more complex patients with a number of options for specialist opinion outside of the hospital itself. These range from: 1) advice only 2) an urgent 'hot clinic' appointment in an out-patient clinic 3) assessment in an ambulatory emergency care facility and 4) admission to an acute assessment unit. In addition, consultant-led clinical assessment and treatment services offered in CHINs will enable more patients to be managed in the primary care setting. Specialties to be considered include gynaecology; ENT; urology; dermatology; musculo-skeletal; and ophthalmology.
- **GP front door model in Emergency Departments:** we will review the existing provision across NCL of GP led triage, treatment and streaming for all ambulatory patients will be provided at the front door of Emergency Departments. GPs and nurses on the door make decisions about where the patient is best treated – which could be in the urgent care centre or emergency department, or redirection to alternative services.
- **Falls emergency response team and multifactorial intervention:** multifactorial interventions combining regular exercise, modifications to people's homes and regular review of medications will prevent people from falling in the first place. If they do fall, falls partnership ambulance vehicles will be available with advanced, multi-disciplinary practitioners. In addition, a specific falls service will support patients to remain at home after a fall.
- **Enhanced rapid response (ERR):** a rapid response team will prevent an admission to hospital for those in crisis, providing enhanced therapy, nursing and social work support to support people to stay in their own home.

- **Acute care at home:** where there is a medical need, acute clinical care will be provided at home by a MDT to provide the best possible patient experience and outcomes, and enable the patient to benefit from holistic integrated care.
- **Frailty units:** a dedicated service, such as that already in place at the Whittington, that will be focussed on rapid assessment, treatment and rapid discharge of frail older people that could potentially be co-located within the Emergency Department. This will enable ambulatory care for people aged over 65. These would be rolled out across NCL.
- **Enhanced care home support:** provided to stabilise and / or treat residents in the care home where appropriate thereby reducing the level of conveyances, unplanned attendances and admissions to secondary care. The care closer to home model will prevent emergency readmissions from care homes through development of a care home bundle, including a proactive approach to prevention and early identification of complications.
- **End of life care:** we will support people at the end of life to receive the care that they need to enable them to die in their place of choice via rolling out the Co-ordinate My Care (CMC) care planning programme, and ensuring the new Integrated Urgent Care service (see section 6.2.4) has access to CMC plans.

Achieving care closer to home will need to be underpinned by strong resilient communities that are able to support residents live independently at home, where that support is needed. The support may be needed from families, carers, neighbours or from voluntary and community groups all of whom have central roles to play.

We plan to bring together the funding currently used for Locally Commissioned Services (LCS) and the premium spent on Personal Medical Services (over and above GMS) and establish one LCS contract framework for the whole of NCL. This LCS contract will have agreed outcomes which are shared with the Health And Care Closer to Home Networks (CHINs) and the Quality Improvement Support Teams (QISTs) so that all local GPs are provided with the necessary funding and incentives to fully engage with these vital components of the health and care closer to home work. Delivery of this whole system alignment is partly dependent on NHS England (London) delegating commissioning of the PMS premium to the CCGs which is currently under discussion with all key parties.

In support of delivering our health and care closer to home model, Islington CCG has expressed an interest in becoming an Integrated Personal Commissioning (IPC) site in order to improve health and wellbeing outcomes through personalised commissioning, improved care and support planning and developing an asset based approach to support solutions.

The IPC site will:

- improve outcomes for patients with care delivered closer to home, and aim to reduce unplanned admissions
- realign service provision in light of new service developments related to IPC and Personal Health Budgets
- review existing contracts to assess impact and identify opportunities for realignment based on a number of other developments such as New Care Models and IPC.

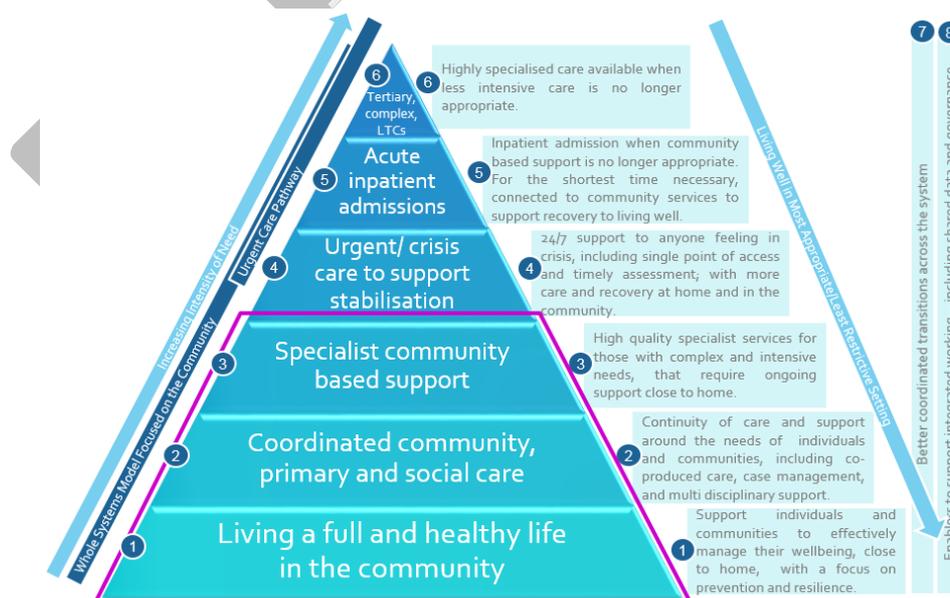
Improving outcomes will be the crucial measure of success of the care closer to home model. Using national and international evidence, we have estimated that some of the outcomes that our health and care closer to home model could potentially deliver are:

- 70% of people at the end of their life will have a care plan to support them to die in their place of choice
- 4% decrease in unplanned pregnancies
- a reduction in alcohol consumption with 10% fewer alcohol-related hospital admissions
- up to 150,000 fewer emergency department attendances
- 63,000 fewer non-elective admissions
- 35,000 fewer outpatient attendances
- 10% reduction in falls-related hospital admissions
- a halving of the numbers of late HIV diagnoses
- 50,000 weight management referrals leading to a reduction in excess weight
- 66% of people with high blood pressure have it diagnosed and controlled
- 55% of people with atrial fibrillation are receiving anti-coagulants
- 69% of people with diabetes have controlled blood glucose.

### 6.2.3 Mental health

We will develop a ‘stepped’ model of care (see exhibit 6) supporting people with mental ill health to live well, enabling them to receive care in the least restrictive setting for their needs.<sup>34</sup> We recognise the key role and accountabilities of social care for people with long-standing mental ill health and drawing on this will be central to the success of the stepped model.

Exhibit 6: The mental health ‘stepped’ model of care



<sup>34</sup> As identified in the Mental Health Taskforce Report

We aim to reduce demand on the acute sector and mitigate the need for additional mental health inpatient beds. This will improve overall mental health outcomes across NCL, reduce inequalities for those with mental ill health, enable more people to live well and receive services closer to home and ensure that we are treating both physical and mental ill health equally. We will achieve the key mental health access standards:

- more than 50% of people experiencing a first episode of psychosis will commence treatment with a NICE approved care package within 2 weeks of referral
- 75% of people with common mental health conditions referred to the Improved Access to Psychological Therapies (IAPT) programme will be treated within 6 weeks of referral, with 95% treated within 18 weeks.

Maisie suffers from dementia, and is cared for by her husband Albert. Previously, after falling at home, Maisie was admitted to hospital. Due to the accident and change of surroundings, Maisie was agitated and more confused than normal. In future, the hospital will have Core 24 liaison psychiatry meaning that the liaison team will be able to help the hospital support both Maisie's physical and mental health needs. As Maisie will receive holistic care it will mean that she is ready to be discharged sooner than if only her physical health needs were supported. Maisie's husband Albert will also be supported by the dementia service, allowing him to continue to care for Maisie at home.

Initiatives will cover mental health support for all age groups and include:

- **Improving community resilience:** both for the general population, and those at risk of developing mental ill health or of it becoming more severe. For the general population this includes a promotional drive aimed at increasing basic mental health awareness including self-awareness, normalising mental health needs and reducing stigma. For the at risk population focus will be given to improving access and support through training of non-mental health specialists to recognise mental ill health symptoms, improving service navigation, development of open resources, and provision of individual and group therapies; employment support to help people to maintain and get back into work including through Individual Placement Support<sup>35</sup>; and suicide prevention work to strengthen referral pathways for those in crisis, linked to the local multiagency suicide prevention strategies.<sup>36</sup> This will be delivered in conjunction with other regional and national schemes such as the London digital wellbeing platform. We will continue to build upon current work; for example Barnet CCG and local authority are already working towards a dementia friendly borough by providing lunch clubs, reminiscent therapy and engaging with local shops to raise awareness.
- **Increasing access to primary care mental health services:** ensuring more accessible mental health support is delivered locally within primary care services, developed as part of the CHINs; enabling both physical health and mental health needs to be

<sup>35</sup> Five Year Forward View - 29,000 more people living with mental ill health should be supported to find or stay in work (~725 within NCL)

<sup>36</sup> Five Year Forward View - Reduce suicide by 10%

supported together<sup>37</sup>. We will offer support directly to patients and support to GPs and other professionals; enabling more people to access evidenced based mental health services<sup>38</sup>, and more care to be offered through CHINs rather than requiring referral to secondary care mental health services. Services will include increasing the IAPT offer to reach 25% of need.<sup>39</sup>

- **Improving the acute mental health pathway:** building community capacity to enable people to stay well and reduce acute presentations. This includes developing alternatives to admission by strengthening crisis and home treatment teams; reviewing Health Based Place of Safety (HBPOS) provision with the view to reduce the number of units and to have a sector wide provision that meets all requirements; and investing in longer term supported living arrangements to ensure effective discharge, enabling more people to live well in the community.
- **Developing a Female Psychiatric Intensive Care Unit (PICU):** we will ensure local provision of inpatient services to female patients requiring psychiatric intensive care, where currently there is none. This will enable patients to remain close to their communities, with a more streamlined and effective pathway ensuring a focus on recovery.<sup>40</sup>
- **Investing in mental health liaison services:** scaling up 24/7 all-age comprehensive liaison to more wards and Emergency Departments, ensuring that more people in Emergency Departments and on inpatient wards with physical health problems have their mental health needs assessed and supported.
- **CAMHS and perinatal:** initiatives as set out in section 6.2.1.
- **Investing in a dementia friendly NCL:** looking at prevention and early intervention, supporting people to remain at home longer and supporting carers to ensure that we meet national standards around dementia, including a dementia diagnosis rate of at least two-thirds of the estimated number of people with dementia.

An important enabler of a number our initiatives is the redevelopment of both the Barnet, Enfield and Haringey Mental Health Trust St Ann's site and the Camden and Islington Foundation Trust St Pancras site (in conjunction with the proposed relocation of Moorfields Eye Hospital Foundation Trust to the St Pancras site).

The proposed developments of the St Ann's and St Pancras sites would:

- transform the current inadequate acute mental health inpatient environments on both sites
- provide more therapeutic and recovery focussed surroundings for patients and staff
- improve clinical efficiency and greater integration of physical and mental health care
- release estate across the trusts, to enable development of community-based integrated physical and mental health facilities
- develop world class research facilities for mental health and ophthalmology enabling practice to reflect the best evidence

<sup>37</sup> FYFV – at least 280,000 people with severe mental ill health have their physical health needs met (~7,000 within NCL)

<sup>38</sup> Five Year Forward View - more adults with anxiety and depression have access to evidence based psychological therapies (~15,000 within NCL)

<sup>39</sup> Five Year Forward View

<sup>40</sup> Five Year Forward View - inappropriate out of area treatments for acute mental health care should be eliminated in all areas by 2020/21.

- provide land for both private and affordable housing, as well as supported housing for service users and housing for key workers.

#### 6.2.4 Urgent and emergency care<sup>41</sup>

Over the next five years, we will deliver urgent and emergency care (UEC) services that are reliable, work well together and are easily understood. Our services will be consistent and inspire confidence in patients and professionals; supported by the use of an integrated digital care record that can be accessed across organisations. The first 2 years will focus on reducing variation in our services and the latter years will focus on transformation of the urgent and emergency care system, aligning closely with the care closer to home model.

Mary is 83 years old and lives at home with her husband. Mary had a fall at home and injured her ankle. Her husband was unable to help her get up so he called 999 for an ambulance. Mary was taken to the nearest A&E and admitted to hospital, where she is diagnosed with a urinary tract infection (UTI). She was reviewed by the consultant: a plan was put in place for treatment of her UTI and physiotherapy was recommended for her ankle. Over the weekend, Mary's UTI improved, but there was no consultant to review her condition or physiotherapist to provide her care, so Mary was unable to go home. When going to the toilet in the night, Mary fell again and stayed in hospital for a further 2 weeks. Mary became increasingly less mobile and more frail and dependent.

In future when Mary falls, her husband will dial 999, and a paramedic will be dispatched. When the clinical assessment does not suggest any fractures, the crew will access the local directory of services whilst on scene and electronically refer Mary to the Acute Care at Home service with request for a 12 hour response. Mary will then be visited at home by the falls team the next day who will design a package of care for Mary including reablement, allowing Mary to stay at home. The falls team will be able to detect if there is anything unusual about Mary's behaviour, and make a rapid appointment with her GP if they suspect a UTI. Mary will then get the antibiotics she needs to resolve this at an early stage.

Our aims are to:

- **Create a consistent UEC service across NCL:** all UEC services in NCL will meet National and London-wide quality standards<sup>42</sup> which will promote consistency in clinical assessment and the adoption of best practice. Patients will be seen by the most appropriate professional for their needs, which may include directing them to an alternative emergency or urgent care service.
- **Develop and implement a high quality integrated UEC service:** all urgent care services across NCL (including NHS 111, GP out of hours, Urgent Care Centres) will work together to offer consistent care. These services will be renamed 'Integrated

<sup>41</sup> This workstream includes all aspects of Urgent and Emergency Care provision delivered in the acute setting, including support for people to leave hospital. Also in scope is the development of a high quality, integrated urgent care system.

<sup>42</sup> As defined by the NHS E UEC designation process

Urgent Care'. We have commissioned a joined up new Integrated Urgent Care service provided by one provider, LCW, which goes live in October 2016. This service combines the NHS 111 and GP Out-of-Hours (OOH) services, and allows patients to access a wider skill mix of specialised clinicians in a new NHS 111 clinical hub.

- **Develop high quality, responsive 7-day hospital UEC services:** people will be supported to leave hospital as quickly as possible through building close links between acute care providers and social care. We will support shorter hospital stays by operating a simplified discharge or integrated 'discharge to assess' model: planning post-acute care in the community, as soon as the acute episode is complete, rather than in hospital before discharge. This will be the default pathway, with non-acute bedded alternatives for the very few patients who cannot manage this.
- **Develop high quality, responsive 7-day community services:** where possible, people will be supported and treated at home by community and ambulance services. For those people who do require ambulance transfer, the ambulance services will be able to use any UEC services that meets the patient's need.
- **Develop high quality ambulatory care services across NCL:** we will develop a service that reduces avoidable, unplanned admissions to hospital, such as that already in place at the Whittington. All UEC services will create consistent ambulatory care pathways that support people to have their care on a planned basis, wherever possible. This will provide same day emergency care to support patients to be assessed, diagnosed, treated and able to go home the same day without an overnight admission. This model will be rolled out across NCL.

The focus on urgent and emergency care services will reduce the number of unplanned admissions to hospital and support people to go home from hospital as soon as possible. This will improve patient experience, improve outcomes and make sure that people have their care on a planned basis wherever possible.

### 6.2.5 Social care

Social care is a crucial part of many of our workstreams, particularly care closer to home, Transforming Care, and mental health, as well as children's and public health interventions. We are considering how local authorities can work with the workforce leads across NCL to design and develop proposals specifically for social care, including a focus on the sustainability of provider workforce, the sustainability of the registered workforce and stimulating the personal assistant workforce. We will ensure that our plans factor in practical steps that we can take as partners to address provider failure and the huge risks around capacity and quality in the domiciliary market.

The role of social workers will be essential to delivering on our model for health and care closer to home, in addition to the role of home care workers, personal assistants, blended role between district nurses and care workers. The workforce workstream will consider these career pathways, making careers in these areas more attractive to support increased sustainability of the workforce. We will quantify any investment that might be needed in workforce from a social care point of view e.g. increasing numbers of domiciliary care

workers and, drawing on learning from elsewhere, we will quantify the return on investment.

Social care is also built into our mental health model, including a broader dimension of public service support such as employment support workers. Learning disabilities is a key area of focus given that half of social care spend is on this group, and that children with special educational needs and learning disabilities have worse long term outcomes in both health and education. We need to start supporting those with learning disabilities from early childhood to ensure early detection and appropriate intervention. Many of our interventions, including health visiting, early years, community paediatrics, CAMHS, and working directly with schools will ensure that we better support these children. We plan to scale up our Transforming Care work to implement enhanced community provision; reduce inpatient capacity; upgrade accommodation and support for those with learning disabilities; and roll out care and treatment reviews in line with published policy to reduce long lengths of stay in hospitals and improve independence.

As part of our STP we will explore collaboration and consolidation opportunities between local authorities in areas such as the hospital discharge pathway and the mental health enablement process. We will consider what can be commissioned differently and/or at scale - particularly across health and social care, for example nursing homes. We will focus on ramping up the use of data analysis and risk stratification; working cohesively with public health across the patch; leveraging telecare; and sharing of ideas and learning about best practice in terms of health and social care integration. Our pan-NCL bed state analysis will consider non-health beds, including the 6,440 care home beds in NCL, so that we gain an in-depth understanding of why people end up in these beds and how best their needs could be met elsewhere (as well as the resources it would take to do this).

We recognise the co-dependencies between health and social care: any change in either sector may have a significant impact on the other. As we continue to develop our plans, we will ensure local authorities are involved throughout so that we can mitigate any risks around this together, and transform the system so that it is truly integrated.

#### 6.2.6 Optimising the elective (planned care) pathway

Building on the opportunities identified through RightCare, we will reduce unwarranted variation in elective (planned) care across providers in NCL. This will include reducing variation in the length of stay in hospital and the number of outpatient appointments received by patients with similar needs. Optimised pathways will ensure patient safety, quality and outcomes, and efficient care delivery.

Previously, John (who is 75 and has pain in his knee) made an appointment with his GP. The GP referred him to the hospital where he was seen in outpatients and sent for an MRI scan. A consultant established that John needed a knee replacement. John was about to go on a trip to visit family in the USA for 2 months, so the consultant sent him back to his GP. When he returned John saw the GP again as well as the consultant, who sent him to preoperative assessment. He was found to have high blood pressure, and was sent back to the GP for treatment. Once his blood pressure was under control, John was listed and then admitted for surgery. He spent about 5 days in hospital, and then returned home.

In the future, John will see an extended scope physiotherapist at the GP surgery for his knee pain. The physio will arrange the MRI, and discuss the results with John. The physio will identify that John has raised blood pressure while completing his electronic referral template to the consultant at the hospital, and liaise with the GP to make sure this is treated before he is referred. John will have his hospital appointment and pre-operative assessment on the same day, and will be given all the information he needs to prepare for after the operation.

We will draw on local examples of best practice, such as the South West London Elective Orthopaedic Centre; and international best practice, such as Intermountain's hip replacement pathway redesign, which reduced the cost of total hip replacement by a quarter.<sup>43</sup> Building on the evidence, we will redesign pathways with local clinicians, responding to local needs and opportunities. We will initially focus on areas with high volume or high variability, where there is opportunity to achieve high impact by making changes, such as orthopaedics.

We will leverage the following opportunities for improvement to elective pathways:

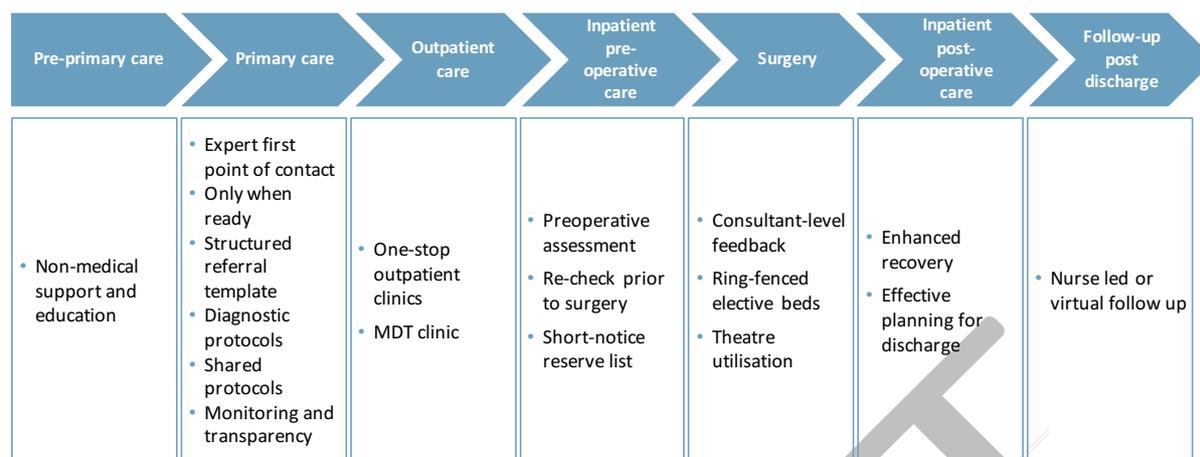
- expert first point of contact: making sure people have access to the right expertise from their first appointment in primary care
- one-stop services: so that people do not need to attend multiple outpatient appointments before their procedure
- efficient surgical pathways: to ensure maximum use of staff and theatres
- timely discharge planning: to reduce unnecessary time in hospital.

To deliver on the above, a series of interventions will be put in place at each stage of the elective pathway. These are illustrated in exhibit 7.

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<sup>43</sup> James and Savitz (2011). How Intermountain Trimmed Health Care Costs Through Robust Quality Improvement Efforts . Health Affairs

Exhibit 7: Interventions that support optimised elective pathways



For orthopaedics, implementation of these high level interventions includes:  
interventions includes:

- **Better use of non-medical support and education:** promoting non-medical support staff as the first line for minor concerns (e.g. at gyms), greater use of pharmacists, and giving patients access to more information online.
- **Expert first point of contact:** the first person the patient comes into contact with would be a GP with special interest or experienced physiotherapist, who would know the full range of treatment options available. As a consequence of this, more outpatient referrals would have diagnostics already performed and patients would be supported by the right information when they are making decisions about onward treatment.
- **Use of a structured referral template:** allowing all information to be available at the first clinic appointment. Ideally, this would be an electronic form which would reduce the risk of unnecessary follow up appointments as all relevant diagnostics and information are readily available to clinicians at the initial appointment. Structured referral templates are currently used by some providers and commissioners in NCL to good effect, but would be used more widely as part of the optimised elective pathway.
- **Improved diagnostic protocols:** administrative protocols would be ordered to ensure that the appropriate tests are being conducted to diagnose patients. This would limit repetitive tests being ordered, which is better for patients and optimises resource use.
- **Use of NCL-wide shared protocols:** would ensure that patients are being managed in a consistent way. It would build relationships and teams across the whole system, fostering trust and reducing duplication in tests, appointments and treatments as a result.
- **Only when ready:** patients are only referred when they are ready and available for treatment. This avoids a second GP appointment and re-referral.
- **Better monitoring and transparency:** peer review and support would be established to ensure referrals are appropriate, enabling clinicians to have an open dialogue

regarding the quality of referrals and continuously improve their own referral practices.

- **One-stop outpatient clinics:** access to simultaneous pre-assessment and additional diagnostics in a single place, reducing the need for unnecessary follow ups.
- **Multi-disciplinary team (MDT) clinics:** clinics which consist of multiple different people working together to triage to the most appropriate clinician. Consultants, extended scope physios and GPs with special interests would all working together in a single setting to form the MDT.
- **Pre-operative assessments conducted at the first outpatient appointment:** if patients are not found to be fit, then their plan is reviewed the same day. This would be supported by greater use of e-self assessment by patients in their home. Rehab and post-operative packages of care would be arranged prior to referral, enabling patients who are at risk of staying for long lengths of time in hospital to be proactively identified.
- **Re-check prior to surgery:** patients will be contacted 48-72 hours before their surgery to reduce the risk of late cancellations. This check will ensure patients are still well enough for surgery, and want to go ahead with the planned procedure.
- **Short-notice reserve list:** to ensure that gaps caused by late cancellation can be filled by patients who are ready for treatment which allows theatres to be used most efficiently.
- **Consultant-level feedback:** transparency of list utilisation and case volumes per list. This allows for peer challenge to take place between consultants, to ensure the highest quality and most efficient practices are being maintained.
- **More effective planning for discharge:** discharge planning services will be offered earlier in the process, before patients are admitted to hospital. This will give greater access to community support services, and reduce delays in discharge.
- **Enhanced recovery pathways will be consistently applied:** patients will have a greater understanding of their expected length of stay when they are admitted, and be advised on the best course of action to avoid staying for longer.
- **Ring fenced elective beds will be available:** to reduce wasted theatre time, and diminish the risk of infection for elective patients.
- **Theatre utilisation will be optimised:** by scheduling cases and ensuring that critical equipment is properly scheduled to maintain the order and running of lists.

In addition to the improvements being worked through for orthopaedics, further specialties have been identified for focused pathway design. These are:

- Urology
- General surgery
- Colorectal surgery
- Hepatobiliary and pancreatic surgery
- Upper gastrointestinal surgery
- Gynaecology
- Gynaecological oncology
- Ear, Nose and Throat (ENT)

- Vascular surgery
- Breast surgery
- Musculoskeletal (MSK)
- Ophthalmology
- General medicine
- Gastroenterology
- Endocrinology

As well as delivering efficiency savings, reducing variation in planned care will improve patient outcomes and experience through:

- improved access to information and support to help people manage conditions without surgical intervention
- support for people to access to the right professional expertise the first time, rather than being referred between several different professionals
- improved access to surgical interventions as capacity will be freed up
- patients receive a single outpatient appointment rather than needing to make several attendances
- less time spent in hospital, meaning less chance of acquiring infections and reducing the risk of lost independence
- ensuring access to the right post-operative support, helping patients get back to normal life more quickly.

Reducing variation will also improve staff experience, including ensuring access to the right professional expertise when needed, better access to high quality diagnostics, improved relationships between professionals in different care settings and increasing sharing and learning from best practice across the local professional communities.

#### 6.2.7 Consolidation of specialties

We will identify clinical areas that might benefit from being organised differently (e.g. managing multiple services as a single service), networking across providers, or providers collaborating and / or configuring in a new way in order to deliver high impact changes to major services. While changes of this sort can be challenging to implement and controversial with the public, we should not shy away from considering making changes

In London, two thirds of early deaths in people under 75 are from cancer and heart disease, there is a high risk of heart disease among the local population and the number of people diagnosed with cancer is growing. Specialists, technology and research are spread across too many hospitals to provide the best round-the-clock care to all patients. If we were to improve local survival rates for heart disease and all cancers in line with at least the rate for England, over 1,200 lives could be saved each year. (Source: UCLH news, 14 March 2014)

UCLH, Barts Health, the Royal Free and a number of other north London trusts implemented a significant service reconfiguration to address these issues. Cardiovascular care services provided at The Heart Hospital, The London Chest Hospital and St Bartholomew's Hospital were combined to create an integrated cardiovascular centre in the new building at St Bartholomew's. For 5 complex or rare cancers, specialist treatment is provided in centres of excellence across the area. Services for other types of cancer and general cancer services, such as most diagnostics and chemotherapy, continued to be provided locally.

where we are sure that significant improvements in the quality of care can be achieved.

We are not starting from scratch in this area: considerable service consolidation and specialisation has already taken place in NCL. Recent examples where we have successfully done this include:

- Cardiac / cancer (see case example box)
- Neurosurgery
- Pathology Joint Venture
- Renal medicine
- Hepatology and hepatobiliary surgery
- Neurosurgery
- Vascular surgery
- Ear, Nose and Throat (ENT)
- Bone Marrow transplantation
- Upper gastrointestinal
- Malignant gynaecology
- Cardiology
- Major trauma services
- Stroke services
- Plastic surgery
- Respiratory sub-specialties
- Cancer services including: pancreatic cancer, renal cancer, skin cancer, prostate cancer, head and neck cancer

However, we recognise that there may be other service areas which are or will become vulnerable in the future. There are many reasons why consolidation of services might be considered as a possible opportunity for improvement. First and foremost, we agree that improving quality should be the key driver for exploring consolidation, particularly where there is clear evidence of patients achieving better outcomes. Where there is a 'burning platform' and it is widely accepted that a service needs urgent attention (for example, in addressing issues of workforce sustainability), consolidation will be explored as an option. Releasing cost savings to support overall system sustainability is another driver for exploring potential consolidation opportunities.

This work is at an early stage. No decisions have been made, but we have identified services where we will review whether some form of consolidation may be worth consideration. It is recognised that fundamental, large scale reorganisation may take longer than the 5 year strategic horizon of the STP. As such, we have made no assumptions of financial benefit from this work.

To understand where we should focus further work, senior clinicians have systematically assessed services based on whether consolidation or alternative networking is required and / or could be beneficial. This has enabled us to identify a long list of services potentially in scope for further work over the 5 year period, for example:

- Emergency surgery (out of hours)
- Maternity services, in the context of the Better Births initiative (see section 6.2.1)
- Elective orthopaedics
- Mental health crisis care and place of safety
- Mental health acute inpatient services
- Histopathology
- General dermatology services

Over the next year each of these services will be reviewed in light of whether they would benefit from consolidation or networking. We are in the process of developing proposals to bring together some mental health inpatient services in order to drive significant improvements in quality and patient experience as set out in the mental health workstream (see section 6.2.3). In addition, work is under way to understand potential opportunities for consolidation of mental health places of safety.

### 6.2.8 Cancer

We will save lives and improve patient experience for those with cancer in NCL and beyond. Commissioners and providers across NCL joined together to form our Cancer Vanguard, in partnership with Manchester Cancer and Royal Marsden Partners, with the aim of achieving earlier cancer diagnosis, ensuring effective use of cancer outcomes information and adoption of recognised best practice across the full spectrum of cancer pathways.

Previously Margaret, aged 60, went to see her GP with persistent epigastric pain for several weeks. She was otherwise well, and did not have reflux, diarrhoea, vomiting or weight loss. Over the course of next 3 weeks, Margaret's GP organised tests and ruled out any inflammation, heart problem, or gallstones that could cause the pain. He also started Margaret on a tablet (lansoprazole) to try to reduce inflammation from the acid on her stomach lining. However, Margaret's pain was more persistent this time and she was still worried.

In the new system, Margaret's GP will be able to refer her to the Multidisciplinary Diagnostic Centre at UCLH despite the fact that her symptoms are not considered "red flag". Here, Margaret will be assessed for vague abdominal symptoms. A clinical nurse specialist will see her 4 days after referral. The team will identify that Margaret has early stage pancreatic cancer and because it is picked up early she will be able to access potentially curative keyhole surgery.

Our cancer workstream is derived from the Vanguard agenda and encompasses a range of improvements to current practice. The key areas of focus include:

- **Early diagnosis:** to address impact of late diagnosis on survival outcomes across NCL, we will target specific causes of late diagnosis and poor detection rates. Targeting colorectal and lung pathways are a particular focus given the high percentage of patients receiving late stage diagnoses, often in Emergency Departments. We will roll out the Multi-disciplinary Diagnostic Clinic model for vague abdominal symptoms, promote adoption of straight to test models and deliver a programme to

improve awareness of cancer symptoms in primary care.

- **New models of care:** we are developing the case for a single provider model for radiotherapy in NCL, to help achieve financial sustainability, reduce variation in clinical protocols and improve patient access to research and clinical innovations. This is being explored between the North Middlesex University Hospitals NHS Trust, the Royal Free NHS Foundation Trust and University College London Hospitals NHS Foundation Trust and also links with the hospital chains Vanguard led by the Royal Free. We will increase provision of chemotherapy closer to home, establishing a quality kitemark for chemotherapy and supporting self-management. The first patient treatment in the home for breast cancer will be available by the end of September 2016.
- **Centre for Cancer Outcomes (CCO):** to deliver robust outcomes data, improve pathway intelligence and address important population health research questions we will produce balanced scorecards which can be made available to MDTs, providers and commissioners through a free to access web based platform.
- **Research and commercialisation:** we will leverage our unique position nationally in cancer to improve care for people with cancer, generate additional revenues across the system, and generate efficiencies by avoiding unnecessary interventions.

#### 6.2.9 Specialised commissioning

Specialised services are those provided in relatively few hospitals / providers, accessed by comparatively small numbers of patients but with catchment populations of usually more than one million. These services tend to be located in specialised hospital trusts that can recruit a team of staff with the appropriate expertise and enable them to develop their skills. In NCL, the main providers of specialised acute services are University College London Hospitals NHS Foundation Trust (with income totaling £317m) and the Royal Free London NHS Foundation Trust (with income totaling £273m). A further 10 providers receive an additional £128m in income for the delivery of specialised services. This includes three specialist hospitals: Royal National Orthopaedic Hospital NHS Trust, Moorfields Eye Hospital NHS Foundation Trust, and Great Ormond Street Hospital NHS Trust. Barnet, Enfield and Haringey Mental Health NHS Trust and the Tavistock and Portman NHS Foundation Trust provides specialised mental health services. As well as caring for the local population, the specialised services provided by hospitals in north central London are also accessed by a population from outside of NCL.

We recognise that planning for specialised services can have an impact across the region (and potentially nationally), and are therefore working closely with NHS England, London region to develop plans in this area. At a pan-London level, 11 priority transformation initiatives for specialised services have been identified. These are:

- Paediatrics
- Cardiovascular
- Neuroscience and stroke
- Renal
- Cancer

- Adult mental health
- Child and Adolescent Mental Health Services (CAMHS)
- Trauma
- Women and children
- Blood and infection
- Medicines optimisation

On review of these pan-London initiatives, our clinical leadership identified 5 areas which resonated strongly as opportunities where we could lead the way in transforming specialised services. We are in the process of progressing plans in the following 5 areas:

- **High cost drugs:** this involves reviewing and strengthening adherence to starting and stopping rules for all high cost drugs. There is already work ongoing in NCL in this area, which has revealed that clinicians are good at starting people on these drugs but poor at stopping them. We will set clear criteria around the use of high cost drugs at an NCL level. In addition, we will reduce the spend on cancer drugs through the Cancer Vanguard Pharma Challenge process, which includes programmes on biosimilars, home administration and system intelligence.
- **Elective spinal surgery:** we will rapidly progress work on assessment, pre-surgical pathways and stratification to ensure patients are directed to the best possible place. This will help us balance demand and capacity more effectively.
- **End of life chemotherapy:** we will undertake a comprehensive review of chemotherapy usage close to the end of life. Using the evidence on when to stop end of life chemotherapy, we will develop protocols around this. We will work across the whole pathway on this issue, and link stopping acute chemotherapy to end of life discussions in primary care, working closely with the Cancer Vanguard to deliver this.
- **Imaging:** we will contain growth in imaging costs by eliminating the need for re-acquisition due to inadequate or unavailable scans. For patients, this will increase the speed of diagnosis and result in a reduction in duplicated contrast or radiation exposure. Implementing a networking approach to imaging will help us to deliver on this, as well as use of information management and technology to enable providers to share information on the scans which have already taken place.
- **Spinal cord injury:** we will redesign the pathway locally to address patients are currently waiting in Intensive Care Unit (ICU) beds to access specialist spinal cord injury rehabilitation services. Waiting in ICU beds can cause the onset of other symptoms leading to worse outcomes for patients and high costs for the system.

We recognise that our planning on specialised services is less developed than many other parts of the STP. We will continue to work with the specialised commissioning team in NHS England, London Region to develop more detailed plans in this area.

## 6.3 Productivity

### 6.3.1 Commissioner productivity (BAU QIPP)

We will continue to deliver significant “business as usual” efficiencies throughout the 5 year period. Business as usual (BAU) QIPP (Quality, Innovation, Productivity and Prevention)

comprises savings commissioners expect to deliver as part of their normal activities. These are efficiencies in areas of CCG spend not covered by our other workstreams and include opportunities in the following areas:

- **Mental health:** this includes ongoing non-transformational efficiencies, consistent with parity of esteem requirements. Examples of mental health QIPP are the management of out of sector placements and streamlining the pathways with specialist commissioning across forensic and mental health services.
- **Community:** spend on community services was c.£133m in 2015/16. There is an assumption of increased efficiency equivalent to 1.5% per annum supported by benchmarking work and transition to new models of care.
- **Continuing care:** spend on continuing care was c.£90m in 2015/16. There is an assumption of increased efficiency equivalent to 2.1% per annum supported by existing framework agreements.
- **Primary care prescribing:** spend on primary care prescribing was c.£205m in 15/16. There is an assumption of increased efficiency equivalent to 2.5% per annum including the adoption of generic drugs where possible, the adoption of local quality schemes to improve consistency and effectiveness. This is in the context of assumed growth of 5-7% per annum.
- **Programme costs (including estates):** this includes measures to reduce void costs and better alignment of health and care services to reduce the overall estate footprint whilst maintaining and improving service quality.

### 6.3.2 Provider productivity (BAU CIP) and system productivity

Significantly improving provider productivity is an essential part of the work to address our financial challenge. Our plans assume significant delivery of CIP (Cost Improvement Programmes), improving provider productivity.

We have identified opportunities for system productivity (defined as those areas where CIP delivery is dependent on trusts working together) to deliver financial savings whilst maintaining or improving quality. Our plans also assume savings from improvements to contracting between CCGs and trusts which will be realised system wide.

Specific initiatives to improve productivity include:

- **Workforce:** we will establish a shared recruitment and bank function across providers meaning that staff can be deployed between providers in the system; as well as improving retention of current staff and upskilling the health and social care workforce to enable delivery of new models of care. We commit to complying with the maximum total agency spend and hourly rates set out by NHS Improvement.
- **Procurement:** we will reduce purchasing unit costs with increased volume and scale across all providers by reducing clinical variation in product choice and undertaking joint action on drugs and medicines management.
- **Back office:** we will create centralised functions for payroll and pensions, finance and estates in order to reduce our overheads and improve service resilience. In addition we will:

- Consolidate IT services to reduce costs whilst improving the resilience and quality of services
- Enhance the existing share procurement arrangements to reduce non-pay costs
- Pool our legal budgets and resources, considering options to consolidate outsourced resources or appoint an in-house legal team.
- **Operational and clinical variation:** we will collectively reduce average length of stay, maximise theatre utilisation and streamline clinical processes, in addition to the changes proposed through the elective workstream.
- **Contract and transaction costs:** Releasing savings from streamlining transactions and contracting. This will be delivered through implementing new commissioning arrangements (which may facilitate joint procurement of services from the Commissioning Support Unit (CSU), for example) and leveraging the opportunities associated with joint commissioning between local authorities and CCGs.
- **Other:** Additional existing provider productivity schemes: estates, clinical admin redesign, service transformation, income etc.

## 6.4 Enablers

### 6.4.1 Digital

We will use digital technologies and information to move from our current models of care to deliver proactive, predictive, participatory, person-centred care for the population we serve.

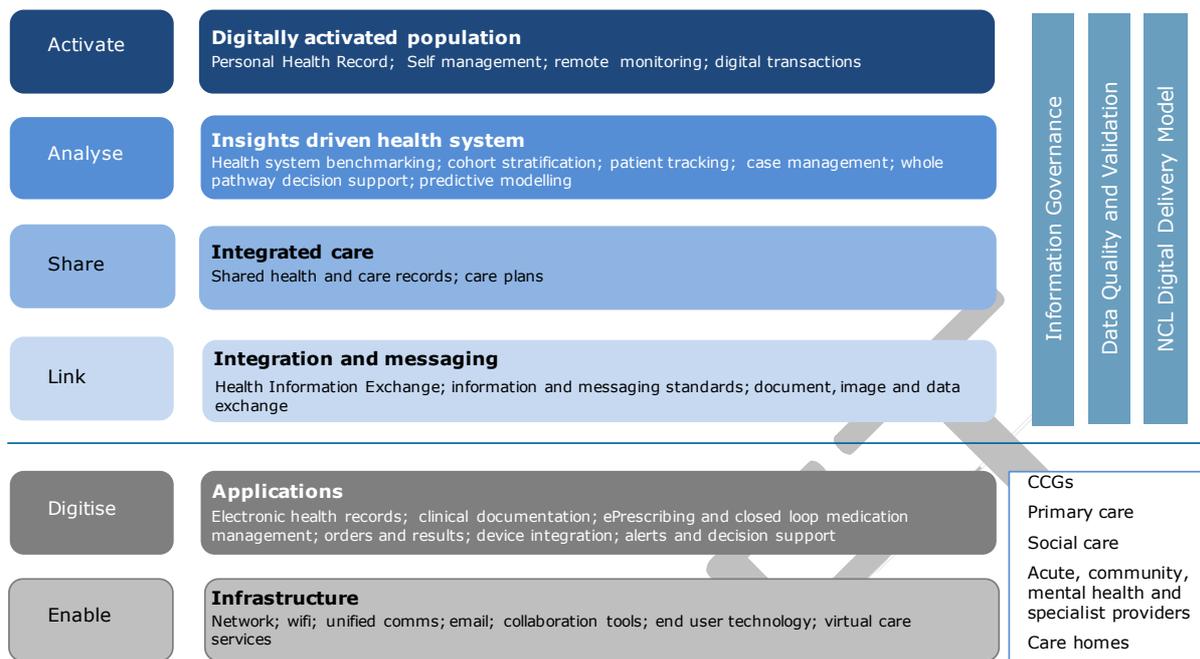
There is significant and immediate opportunity for digital to transform our current delivery models and seed completely new, integrated models of health and social care. We recognise the strength of both the clinical and financial case for digital and its potential impact in strengthening productivity, providing ease of access to our services, minimising waste and improving care. Our ambition is to become a national leader in population health management enabled by informatics, to reduce variation and cost and improve care.

We will prioritise and increase pace of appropriate digital technology adoption within our organisations, realigning the demand on our services by reducing the emphasis on traditional face to face care models. In addition, we will explore new digital alternatives that will transform our services, with the aim of moving care closer to home, enabling virtual consultations and providing our patients with the information and resources to self-manage effectively, facilitating co-ordinated and effective out of hospital care. We will utilise opportunities for real-time, fully interoperable information exchanges to provide new, flexible and responsive digital services that deliver integrated, proactive care that improves outcomes for our patients.

Our digital programme proposes the creation of an NCL Population Health Management System (exhibit 8), which supports prevention, service transformation and productivity, and would enable us to meet the national mandate of operating paper free at the point of care by 2020. Through this system we will move from a landscape of diversity and variation to one of shared principles, consolidation and joint working for the benefit of the population.

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### Exhibit 8: NCL Population Health System Management



The 6 workstreams that make up our digital strategy are:

- **Activate:** We will provide our citizens with the ability to transact with healthcare services digitally, giving them access to their personal health and care information and equipping them with tools which enable them to actively manage their own health and wellbeing.
- **Analyse:** We will use data collected at the point of care to identify populations at risk, monitor the effectiveness of interventions on patients with established disease and deliver whole systems intelligence so that the needs of our entire population can be predicted and met.
- **Link:** We will enable information to be shared across the health and care systems seamlessly.
- **Share:** We will create and share care records and plans that enable integrated care delivery across organisations.
- **Digitise:** We will support our providers to move away from paper to fully digital care processes; including documentation, ordering, prescribing and decision support tools that help to make care safer.
- **Enable:** We will provide infrastructure which enables our care professionals to work and communicate effectively, anywhere at any time, and facilitate new and enhanced models of care closer to home.

To deliver on our digital strategy we will need to invest £159m, with a further £21m in 2020/21 (see section 8.3).

## 6.4.2 Estates

Our vision is to provide a fit for purpose, cost-effective, integrated, accessible estate which enables the delivery of high quality health and social care services for our local population. The priorities for development of our estates strategy are:

- to respond to clinical requirements and changes in demand by putting in place a fit for purpose estate
- to increase the operational efficiency of the estate
- to enhance delivery capability
- to enable the delivery of a portfolio of estates transformation projects.

There are a number of barriers to achieving this, including:

- the complexity of the estates system in NCL, including the number of organisations and the differences in governance, objectives and incentives between each organisation, which often results in organisations working in silos
- misaligned incentives, which do not encourage optimal behaviour
- lack of affordability, specifically the inability for trusts to retain capital receipts, budget “annuality” and the difficulty of accessing capital investment for re-provision
- the complexity of developing business cases in terms of getting the right balance of speed and rigour, and the different approvals processes facing different organisation types (for example, there are different capital approval regimes operating across the NHS and local government).

We are working as part of the London devolution programme to pilot devolved powers in relation to the health and care estate. As part of this, we are asking for:

- local prioritisation and investment of capital receipts, including those that would otherwise be retained nationally
- NHS capital business case approval to be accelerated and consolidated through the implementation of a jointly owned and collaborative NCL / national process (or devolved to sub-regional or London-level)
- development of enhanced and revised definitions of value for money, which consider social value, wider community benefit and system sustainability at the sub-regional level
- new approaches for the accounting treatment of multi-year projects for non-foundation trust providers, in support of our plans
- developing local flexibilities in terms and conditions for the primary and community health estate to improve quality and utilisation
- support to agree the London-level and NCL delivery options to enhance our work
- ability to pay off PFIs using money raised from capital sales and/or a commitment by national partners to renegotiation of such agreements, where they have been identified as a significant barrier to financial sustainability and/or the facility is less than 50% utilised and no other utilisation solution will address the issue.

We anticipate the following benefits:

- a whole system approach to estates development across NCL, with different partners working together on projects and developing a shared view of the required investment and development to support clinical change
- the ability to undertake better local health economy planning, including establishing estates requirements
- increased affordability of estates change across NCL
- greater incentives to dispose of surplus property, releasing land for housing
- focused action on the development of the estates requirements to deliver care closer to home
- greater efficiency and flexibility in the estate, reducing voids and improving utilisation and co-location which will support financial savings

Across the sites of Moorfields, St Pancras, St Ann's we are beginning to evidence qualitative benefits of working together to deliver estates value and improvement. The sector for a number of years has had unresolved estates issues relating to poor mental health inpatient accommodation and potentially saleable and high value estate at St Pancras Hospital. The 3 providers are working together on this strategic estates project which aligns estates priorities between all 3 trusts.

The proposed programme, which is still subject to consultation, would see sales proceeds from surplus assets used to deliver new purpose built mental health accommodation, and the eventual relocation of Moorfields Eye Hospital to the St Pancras site. Clinical improvements would be prioritised through the building of a new Institute of Mental Health and an integrated Eye Hospital and Institute of Ophthalmology at the current St Pancras Hospital site.

The three trusts are currently refining their outline business cases, with Board decisions due in late 2016 and early 2017. Subject to consultation, further testing of economic viability and planning permission, the specific benefits of the work will include:

- development of a new world class research, education and clinical care facility housing an integrated Moorfields Eye Hospital and UCLH's Institute of Ophthalmology, transforming ophthalmology facilities that are at present a constraint on continuous improvement
- improvements to the estate to meet CQC "must dos" including new mental health inpatients facilities for Camden and Islington NHS Foundation Trust (including the integration of physical and mental health and social care through an integrated practice unit at St Pancras). Also, new facilities for Barnet, Enfield & Haringey Mental Health Trust at St Ann's Hospital, Tottenham
- a world class UCLH Institute of Mental Health and associated patient care and educational facilities at St Pancras Hospital
- potential to deliver c.1,500 new housing units in London, significantly contributing to the NHS target for release of land for residential development
- improvements to environmental sustainability, as the new builds will deliver a balance between BREEAM ratings for 'green' initiatives, the cost of the capital build requirements to deliver them and the whole life cycle benefits in terms of costs and

a more sustainable future for our planet. We will design, build and operate in a manner that supports recycling and use of low carbon technology.

The schemes are planned at a total capital cost of c.£400m (see section 8.3) with joint provider engagement under the umbrella of the estates devolution pilot driving completion of the final scheme by 2023. It is planned that £326m of this is financed by sale proceeds with the remainder funded from a variety of sources, including philanthropy.

Progressing this scheme may lead to a platform for sector wide capital prioritisation and create an improved incentive framework for asset disposal and enhanced utilisation, which will give rise to a locally originated capital funding stream.

In line with the findings of Healthcare for London in 2014, our analysis shows that significant capital work is required across NCL to improve the primary care estate. The primary and community estate needs improvement in a number of areas:

- development of CHINs to enable the delivery of the care closer to home model
- expansion and development of primary care facilities to ensure registration for a significantly expanding population and extended hours access
- whilst some capital to enable delivery may be available through the estates technology and transformation fund (ETTF), it is unlikely that this will cover the full set of requirements of £111m. Devolved powers will enable us to secure capital to deliver these much needed improvements and reduce the running costs of this estate.

#### Exhibit 9: NCL CHIN estate planning

NCL CCG CHIN current locational planning (NB Early stage and subject to full consultation)		
<b>Barnet CCG</b>	North East South West	Vale Drive Health Centre: The site identified is a LIFT building and hence it will improve utilisation Finchley Memorial Hospital: A LIFT building which is a natural hub and this will improve utilisation Grove Mead and/or new Colindale HC: A new health centre/CHIN is planned for Colindale (ETTF & S106) Edgware Community Hospital: ECH is another natural activity hub and also an underutilised site at present
<b>Camden CCG</b>	North North East South West	Hampstead Group: An extension to an existing practice is planned to create a health centre/CHIN (ETTF) Kentish Town Health Centre: A LIFT building which is a natural hub and this will improve utilisation Somers Town: An existing practice that is well placed to serve as a CHIN West Hampstead: An existing practice that is well placed to serve as a CHIN
<b>Enfield CCG</b>	North East South East South West North West	Freezy Water/Ordnance Community Centre: Existing practices that perform and are well placed ( CHIN TBD) Forest Road HC and Evergreen HC: LIFT buildings in Edmonton and this will improve their utilisation Winchmore Hill: An ETTF scheme aims to extend an existing practice to develop a health centre/CHIN hub Chase Farm/Cockfosters (Holbrook House): Either on the Royal Free hospital site or within a new mixed-use
<b>Haringey CCG</b>	North East South East South West North West	Somerset Gardens: An ETTF scheme aims to extend an existing practice in the White Hart Lane re-gen area Tynemouth: A well placed existing practice currently providing extended access Hornsey Central (Queenswood): A LIFT building which is a natural hub and this will improve utilisation Bounds Green: A well placed existing practice currently providing extended access
<b>Islington CCG</b>	North Central South	Archway: An ETTF scheme to develop a new build health centre/CHIN Islington Central: A well placed and effective existing practice which can serve as a CHIN Ritchie Street: A well placed and effective existing practice which is able to serve as a CHIN

### 6.4.3 Workforce

We aim to ensure that NCL becomes the place of choice to train, work and live healthy lives. This includes co-creating, communicating and collaboratively delivering a compelling offer to attract, develop retain and sustain a community of people who work in health and care in NCL. Our workforce needs to move further towards a person-centred approach and this means developing a whole range of new skills, training modalities and new roles.

Our vision is for staff to be part of the wider NCL workforce, not just part of a single organisation. Through this we will achieve efficiencies in employment by managing services collectively across the footprint. We will create sustainable career pathways to attract, develop and support a workforce fit for purpose in the changing health and care landscape. We will work with NCL organisations across all care settings (including social care) to support their collaborative efforts to be excellent employers – employers of choice, committed to looking after the wellbeing of staff whilst also preparing them to begin delivering the new care models. This will support NCL organisations to recruit and retain staff, particularly where employee turnover rates are high or where there are staff shortages. Career pathways will not be limited to a single care setting and will offer our staff opportunities to experience a wide range of different opportunities which fit their own aspirations. This process will allow us to work towards the development of an integrated employment model and a personal career passport for staff to develop their career over the long-term within NCL.

We aim to improve employee wellbeing and reduce avoidable sickness absence cost-effectively, therefore increasing lifetime productivity. We will focus on implementing the healthy workplace charter in NHS organisations, local authorities and in small and medium sized businesses.

Through equipping the existing workforce with new skills and ways of working, we will both ensure that our people are working to the best of their ability as well as adapting roles to meet the changing requirements of our services. We will support some of those people currently working in hospital settings with the skills and confidence to work across the care pathway, reaching out into community care settings and delivering the care closer to home model. We will similarly enhance the capabilities of those currently working in social, community and primary care. We will equip all our existing and future staff with motivational and coaching skills, competence in promoting self-care and prevention, and the enhancement of emotional resilience in themselves, their teams and their patients. All frontline NHS and local authority staff will be trained online in Making Every Contact Count (MECC), with key frontline staff also receiving face-to-face training. All non-medical frontline staff will receive training in Mental Health First Aid (MHFA). All NHS and social care staff will be trained in basic dementia awareness, with more advanced training for frontline staff who are more likely to encounter people living with dementia.

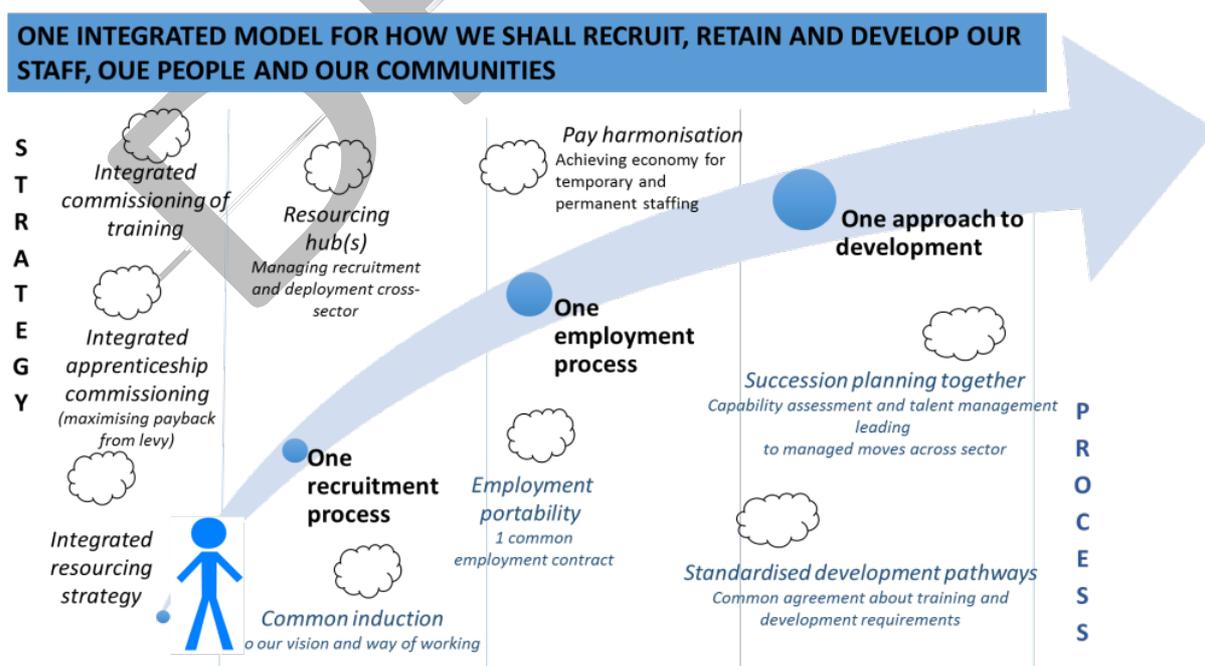
While most of the people who will be engaged in delivering the NCL vision are already with us, working in roles which will need to adapt or change in some way, we will also support the establishment of a small number of new roles, such as physician's associates, care

navigators and advanced clinical practitioners. We will undertake expert strategic workforce planning and redesign, and commission training for skill enhancement, role diversification and new role implementation.

To enable transformation, we will deliver system-level organisational development, supporting system leaders as individuals and as teams through the transformation journey to enable personal resilience and courageous action. In addition, we will train everyone in a single approach to continuous quality improvement to create a culture of continuous improvement to deliver clinical excellence and quality care.

Health, social care and public health delivery is not limited to employees of our traditional employers, and our notion of working with the 'wider workforce' extends to the numerous carers, volunteers and citizens who improve the life of our population. In order to improve the general wellbeing of our population and make use of the substantial social capital across our footprint, we will educate and support patients, carers and those in their communities in areas such as self-care, self-management, dementia and mental health awareness. Building on our 'wider workforce' vision and aligning with initiatives such as the Alzheimer's Society ambition for London to be a dementia friendly city by 2020, we will support the training of groups such as barbers, hairdressers, librarians and teachers to gather a better understanding of dementia and other long term conditions. Across NCL, we have already built five strong Community Education Provider Networks (CEPNs), and these will provide an effective vehicle for delivery of this aim. We will review the provision of learning and development across NCL to ensure we make the best use of existing assets to encompass the wider healthcare community including patients and carers. Our immediate aims will be to standardise and streamline statutory and mandatory training, align induction and share in-house learning and development capacity.

*Exhibit 10: Integrated workforce model*



#### 6.4.4 New commissioning and delivery models

As part of the STP development process, and in response to the changing healthcare landscape in NCL, the 5 CCGs have been exploring ways of working more collaboratively together whilst also seeking to strengthen joint commissioning with local authorities. We have concluded that a more formalised degree of cooperation between the 5 CCGs will improve health commissioning, particularly in response to:

- the development of new models of care, including larger provider organisations such as the Royal Free Vanguard.
- increasing financial risk
- stretched capability and capacity.

Our work has covered the development of a proposal for joint governance of strategic commissioning decisions (see section 9.2.1); the development of a common commissioning strategy and financial strategy; and, a review of CCG management arrangements, with a view to shaping new ways of commissioning. With a focus on population health systems and outcomes and the transition to new models to deliver these, our objective is to further strengthen strategic commissioning over the next 2 years. We have agreed that any new commissioning arrangements need to balance the importance of local relationships and existing programmes of work with the need to commission at scale.

The governing bodies of each of the CCGs have agreed to the need for new executive management arrangements including shared roles across the CCGs: an Accountable Officer; a Chief Finance Officer; a Director of Strategy; and, a Director of Performance. Additionally, in order to ensure the continued role of each CCG in respect to its local commissioning and joint work with local government, local Directors with responsibility for local functions and services have been proposed.

These new leadership positions will work with each of the CCGs, as well as the new shared governance structure described in section 9.2.1, to ensure that health commissioning in NCL delivers the best possible health and wellbeing for the local population whilst ensuring value for money. The arrangements will be further considered by governing bodies in November with the expectation that the new leadership will be in place no later than 1 April 2017.

In parallel, commissioners and providers across the system have been working together to define our direction of travel in terms of new delivery models. We already have significant work we can build on relating to this, including the Royal Free London's provider chain model; the UCLH Cancer Vanguard; the Moorfields Eye Hospital ophthalmology specialty chain; and, the Royal National Orthopaedic Hospital NHS Trust chain of orthopaedic providers.

We have consulted with the leaders of all organisations across the system to get views on the different options for new delivery models, and the broad consensus includes moving towards:

- whole system working with a population rather than individual organisational focus
- a deeper level of provider collaboration, including collaboration between primary care, community services, acute services, mental health services and social care services.
- the establishment of some form of 'new delivery vehicle' or 'new delivery system' to support this provider collaboration.
- a transfer over time of some elements of what we currently consider commissioning functions (for example, pathway redesign) into these new delivery vehicles.
- a move towards some sort of population based capitated budget for the new delivery vehicles.
- the retention of a strategic commissioning function responsible for holding the delivery vehicles to account, with accountability for outcomes rather than inputs based on principles of commissioning for value.

Further work needs to be done to resolve issues and differences of view around the following:

- the organisational form for the new delivery vehicles
- the optimal population size for population health management
- the geography over which new delivery vehicles should operate
- the form and governance of the strategic commissioning function
- which commissioning functions should remain with the strategic commissioning function and which should be undertaken through the new delivery vehicle.
- the scope of the new delivery vehicles
- unresolved issues such as how to manage patient choice, specialised services and other flows outside of the delivery vehicle and a full understanding of the legal framework which might impact on implementation
- speed of implementation.

Discussions continue across health and care commissioners and providers in NCL to establish agreement about the nature and scale of new delivery vehicles. Different care models are still being considered, and this work is being steered through the STP governance framework.

## 6.5 Measuring our success

We have established the anticipated impact of each of our workstreams to ensure we remain on track to close the key gaps as set out in our case for change. However, to ensure that the breadth of our workstreams collectively meet the scale of our ambition, 11 overarching outcomes have been developed by the London Health Commission for the Better Health for London strategy. These have been adapted for NCL and endorsed by the clinical cabinet for our STP. We will know if we have been successful by measuring impact against these outcomes over the next 4 years.

## Exhibit 11: NCL STP outcomes

-  Ensure that all children are school-ready by age 5. Achieve a 10% reduction in the proportion of children obese by Year 6 and reverse the trend in those who are overweight
-  Help all our residents to be active and eat healthily, with 70% achieving recommended activity levels
-  Reduce working days lost due to sickness absence
-  Reduce smoking rates in adults to 13% - in line with the lowest major global city.
-  Reduce the gap in life expectancy between adults with severe and enduring mental illness and the rest of the population by 5%
-  Increase the proportion of people who feel supported to manage their long-term condition to the top quartile nationally
-  Transform general practice in NCL so residents have access to their GP teams 8am-8pm, and primary care is delivered in modern purpose-built/designed facilities
-  Work towards having the lowest death rates for the top 3 killers: cardiovascular disease, Cancer, respiratory disease and close the gap in care between those admitted to hospital on weekdays and at weekends
-  Fully engage our residents in the design of their services, and achieve a 10 point increase on the poll data regarding engagement in designing services.
-  Put NCL at the centre of the global revolution in digital health and ensure this improves patient outcomes
-  We want to reduce air pollution across NCL, to allow our residents to live in healthier environments

## 7 Delivery plans

A delivery plan has been developed for each of our workstreams, setting out the scope; objectives; financial and non-financial impact with trajectories; any investment requirements and the key risks to successful delivery. We will finalise the details of the delivery plans over the next few months as we agree the detailed phasing and investment timetables.

The delivery plans will be live documents and will continue to be iterated as the programme develops. In addition, each workstream is required to develop a full programme initiation document which will provide a reference point for every workstream to ensure planned delivery is on track, and to support the effective management of interdependencies between workstreams.

## 8 Bridging the financial gap

The financial analysis that we have undertaken (see exhibit 2) shows the significant gap between anticipated growth in demand (and therefore cost growth) for the NHS in NCL and the growth in funding that the NHS expects to receive over the 5 years of the STP. Without changing the way that we work together as a system to provide a more efficient, joined up service across organisations, this would leave us with an estimated £876m deficit in 2020/2021.

The STP in NCL has brought together organisations across health and social care to jointly discuss how we can address this financial challenge as well as making progress in improving the quality of, and access, to services. Based on the plans and analysis set out in this STP, which have been developed with and by local clinical experts, we will reduce the annual deficit over the next five years to £75m (exhibit 12) – whilst this addresses more than 90% of the financial gap, we recognise that further work is needed.

The key elements of the plan are set out in detail elsewhere in this document. Exhibit 12 shows how these contribute to the improvement in the annual financial position of the NCL system over 5 years. The key areas of work are:

- **Care closer to home:** savings of £114m have been estimated from improving access to primary care; proactively identifying need and early intervention to avoid crisis; rapid response to urgent needs to prevent hospital admissions; providing community-based and ambulatory-based care; and reducing delays to discharge.
- **Prevention and the support of healthier choices:** this is estimated to result in savings of £10m.
- **Mental health outreach and liaison:** this is estimated to result in savings of £6m.
- **Optimising the elective pathway:** savings of £55m have been estimated from benchmarking against best practice; working closely with clinicians; optimising flow through theatres (increasing throughput); and reducing length of stay - in addition to the excellent work that our hospitals and other providers do to improve productivity each year.
- Additional plans are being developed relating to the **UCLH Cancer Vanguard** scheme and **Royal Free Hospital Chain Vanguard** which are estimated to deliver £35m.
- **System level productivity** savings of £98m are planned to be achieved alongside the 'business as usual' cost improvements across providers in NCL of £218m and local commissioner business as usual efficiencies (QIPP) of £57m.
- We have identified a potential saving of £24m per year through 'buying out' a number of **Private Finance Initiative** hospitals, bringing management of these facilities back within the public sector. We will continue to work with the Department of Health and others to develop these plans, recognising that there are a number of constraints.
- Although detailed plans have not yet been developed, we have been advised by NHS England to assume that the NCL proportion of the **London Ambulance Service (LAS)** financial gap of £10m and the estimated **specialised commissioning** pressure of £137m will be fully addressed by LAS and NHS England respectively. NCL hospitals provide a very significant amount of specialist care and it is therefore essential that NHS England works together with the STP on how these services can flourish whilst

also addressing the financial pressures associated with the growth in specialist activity (which in most developed economies is higher than growth in other services due to new technologies, drugs and clinical interventions).

- Further work is ongoing in relation to developing a fuller understanding of the social care financial position and pressures. At present no financial values have been included as advised by NHS England, but this has not prevented the STP from working very closely across both health and social care. In particular the NHS within NCL is seeking to learn from local authority colleagues best practice in relation to reducing cost whilst improving the experience of people who use services and the public.

These improvements cannot be achieved without investment. The plan is based on investment of £64m in prevention and care closer to home, and £4m in elective care. We have also assumed that £31m of our indicative £105m share of the Sustainability and Transformation Fund will be required to fund national policy priorities over and above these investments, in addition to that already assumed within the 'do nothing' scenario.

The savings set out above are predicated strongly upon reducing significant activity in acute hospitals, in particular reducing demand for inpatient care. We know that realising such savings can be difficult in practice and are contingent upon removing or re-purposing capacity within acute hospitals. As such, through working with the clinical cabinet of clinical leaders within NCL we have assumed that the cost savings that will be realised from each avoided day of acute hospital care will be significantly lower than the average tariff that is currently paid to providers by commissioners for this care. This is reflected in a £53m 'risk adjustment' in the financial analysis.

### 8.1 Normalised forecast outturn by year

Each year there will be a number of one-off costs and income streams to the commissioners and providers within NCL. Our 5 year financial analysis is initially based upon the "normalised" (or underlying) financial position in 2016/17 which is then projected forward. We estimate that 2016/17 outturn will be a normalised deficit of £216m (£101m on an in-year basis). Significant one-off figures within this include UCLH's transitional funding that it is receiving to compensate for the financial impact of moving cardiac services to the new, world class centre at Barts hospital, and the Royal Free's transitional funding in relation to the merger with Barnet and Chase Farm. The underlying figure also includes a £40m adjustment which is an estimate of the combined risk to the NHS provider and commissioner forecast outturn. This has arisen as a result of potentially different assumptions between NHS commissioners and providers about the value of work undertaken by the end of 2016/17. We have reached an agreed view on forecast outturn activity and will continue to work urgently to ensure consistency of payment assumptions between different parts of the NHS within NCL. All parties have agreed a more 'open book' approach to contract agreements that will ensure a consistent, system-based approach.

The STP plan shows a gradual improvement in the financial position over the 5 years of the STP (exhibit 13). The normalised position improves year on year. This pattern is in part caused by the requirement for majority of the investment in the early years of the STP, with benefits accruing in the later years.

## 8.2 2017/18 forecast operating plan

In 2017/18 we estimate that our in-year position will be a £95m deficit for NCL against a draft system control total of £13m surplus (which we anticipate will change over the coming weeks due to a number of technical issues). This incorporates significant investment during the year on service transformation and delivery of the Five Year Forward View:

- investment in service transformation: £25m. This relates to the care closer to home (£23.5m), elective (£0.8m) and outpatient (£0.4m) workstreams
- other recurrent investment by CCGs and trusts – included within the CCG and trust cost movements it is estimated at £25m in 17/18 to deliver elements of the 5YFV priorities
- other non-recurrent costs (estimated at £20m in 17/18) for investment in Vanguard costs, IT digital costs, and STP programme costs.

In line with NHSE guidance we have also assumed that we will receive our 'fair share' of the national Sustainability and Transformation Fund (£105m) in 2017/18. This compares to the £52m currently notified to NHS providers, and additional a further £53m improves our revised forecast operating plan position to a deficit of £62m – see exhibit 14.

## 8.3 Capital expenditure

We recognise that the national capital budget for the NHS is highly constrained over the course of this parliament, and will continue to work hard to minimise the need for significant capital investment unless there is a strong return on investment. NCL also has a number of creative proposals that will seek to maximise disposal proceeds from sites no longer required, and use these to reinvest in the priority areas of the STP as well as the potential to provide additional, much-needed housing for the residents of NCL.

There are a number of large capital schemes that are already approved and underway within the STP and, whilst far from being 'business as usual' these are included in the 'do nothing' scenario as their approval pre-dates the STP work. Total capital, before specific STP-related investment, is £1.2bn over the 5 years. This includes:

- **UCLH new clinical facilities:** haematology-oncology and short stay surgery – (£137m); Proton-beam therapy (£130m), ENT and dental facility to consolidate two existing hospitals onto the main University College Hospital campus (£98m) and other more minor schemes. UCLH have approved DH funding of £278m (£51m public dividend capital (PDC) and £227m DH Loan) as well as anticipated, ring-fenced disposal proceeds to finance these developments
- **Royal Free - Chase Farm redevelopment:** (£183m), which includes £93m of approved DH funding (£80m PDC and £13m DH Loan).

In addition to these major developments there is of course significant business as usual capital investment such as equipment replacement and building maintenance, funded through depreciation, cash reserves and other sources of funding (including disposals).

The additional gross capital requirements to implement the transformation programme set out in the STP totals £542m, with a much smaller net investment requirement after taking into account disposals, donations and grants:

- **Estates redevelopment:** relating to our St Pancras/St Anns/Moorfields proposals: £404m, assumed to be funded through disposals (£326m), DH loans (£39m) and Donations (£37m), of which **£272m** (including short term bridging loans and repayments) occur within the period covered by this STP (i.e. before 2020/21) and is included above. This scheme, including an assumption of DH loan funding, has yet to be agreed, and will be subject to normal Business Case processes through NHS Improvement.
- **Primary Care for Care Closer to Home and 5YFV investment: £111m** assumed to be funded predominantly through ETTF (£60m – all bids submitted), s106/CIL/GP contributions (£26m), grants and other sources.
- **IT investment: £159m** with a further £21m in 2021/22. All assumed to be funded by ETTF (circa £10m – bids submitted for the Person Held Record/IDCR) or through the central Digital Transformation Fund.

We recognise that further work is needed to develop full business cases for the above, and at present these figures are estimated - particularly in relation to primary care and digital investment. In developing these schemes we will seek to maximise the use of existing buildings and other assets, and minimise the need for new capital investment, together with applying a robust requirement for return on investment for each scheme. However, we fundamentally believe that investment in primary care and digital technology is central to the transformation of services that is needed in NCL to address the gaps in service quality, access and finance, and wholly consistent with the Five Year Forward View and requirement to be paper-free at the point of care by 2023. It would be wrong to assume that such investment is not required and will not deliver value simply because of the stage in development of these plans that NCL is currently in.

The estates redevelopment relating to St Pancras, St Ann's and Moorfields, and the estates devolution work, offers an exciting and compelling vision as to how existing assets, disposals, redevelopment and construction of new facilities can be financially efficient as well as delivering significant benefits to patients, service users and the wider population.

In addition, we will continue to engage as an STP with the work being led by Sir Robert Naylor in relation to property strategy across the NHS, to further understand how being a pilot area in this can help NCL make best use of its current assets to support the delivery of our STP vision.

#### 8.4 Next steps to address the financial gap

We are very clear that we have more to do to close the financial gaps for the remainder of 2016/17 and across the next 4 years of the STP.

We will therefore undertake a period of further intensive work over the next 8 weeks both to improve confidence in delivery of current estimates, whilst concurrently working on other areas to further improve the position. As far as possible we will aim to do this by

Christmas, so that our operating plan submission improves on this submission. However, we do believe that there is a risk that the gap will not be fully closed in every year whilst ensuring that we continue to prioritise quality of and access to services, particularly as we balance the need to invest in the early years to deliver transformational benefits in later years. It is also essential that STPs and their constituent organisations and leadership are given the regulatory headroom to develop longer term plans, and that the 'new models of care' being developed give clarity of financial accountability to support the financial challenges that the STP faces.

We have identified a number of immediate actions to improve our current financial position, which include:

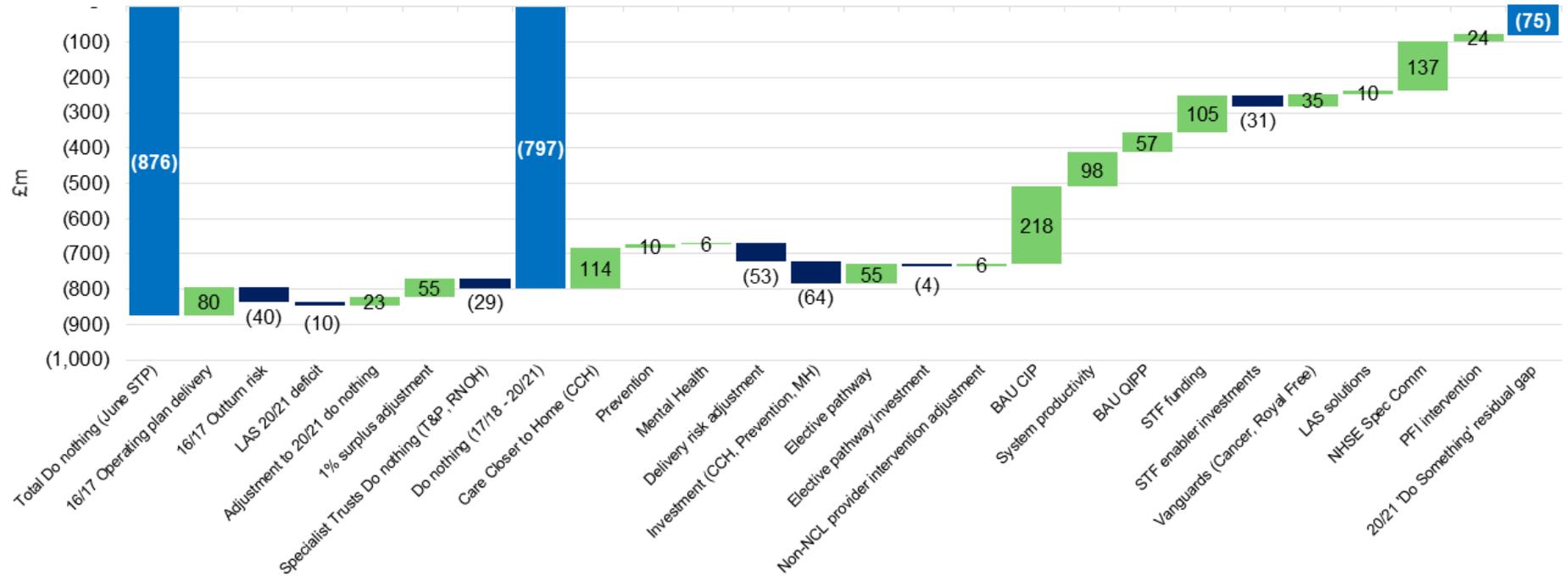
- early delivery of high impact care closer to home interventions
- accelerated delivery of stretch targets for high impact elective pathways
- increased effort in terms of delivering efficiencies through provider productivity schemes
- reducing any non-value added contracting costs
- implementation of pay harmonisation and shared principles around usage of bank and agency staff
- leveraging existing capacity in NHS providers to reduce outsourcing of activity to the independent sector
- other non-recurrent savings measures
- assessing and incorporating the impact of 2017/18 tariff changes.

There are also a number of areas that we will explore further as we believe there may be significant savings to be found. These include:

- maximising clinical productivity across providers, for example introducing shared clinical rotas
- developing alternative pathways for the London Ambulance Service to avoid conveyance to Emergency Departments
- rolling out standardised pathways to all specialities
- identifying opportunities to reduce the length of stay for patients receiving specialist services
- reviewing any plans that require capital and have not yet been agreed to establish the most cost effective way to deliver agreed outcomes
- rapid implementation of cancer initiatives, including early diagnosis, new models of care, end of life interventions and research and innovation
- re-providing cost effective services for the c.20% of people we estimate are currently in hospital beds but are medically fit to leave
- putting in place a peer review challenge approach across all areas of spend to identify further opportunities to reduce or avoid spend, and to aid collective delivery of plans.

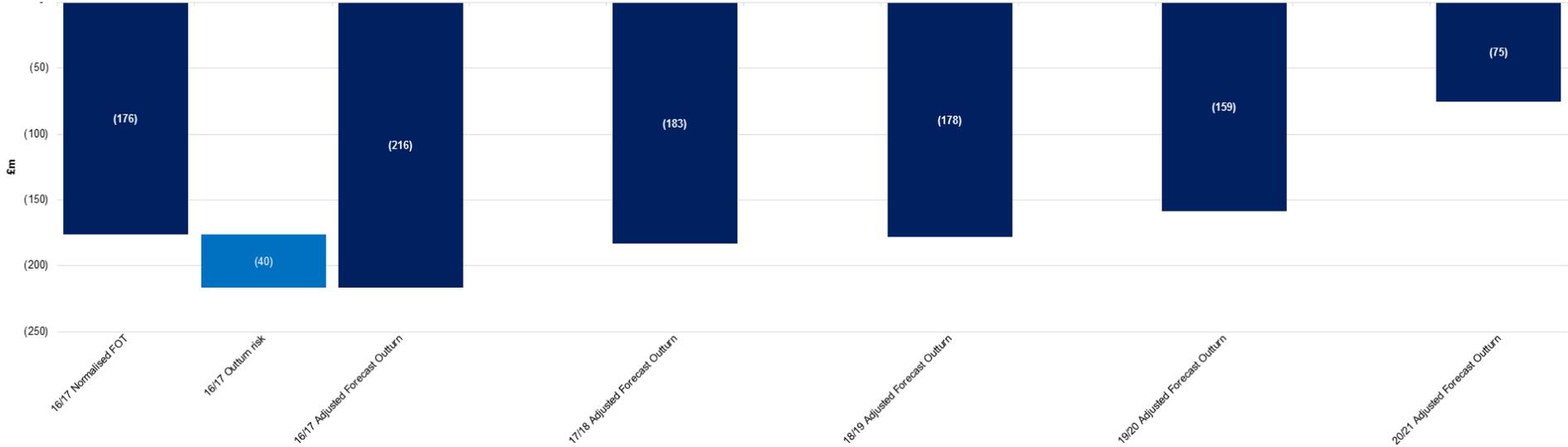
Exhibit 12: Bridging the financial gap to 2020/21

Adjusted NCL 'Do something' financial gap



*Exhibit 13: Normalised forecast outturn by year*

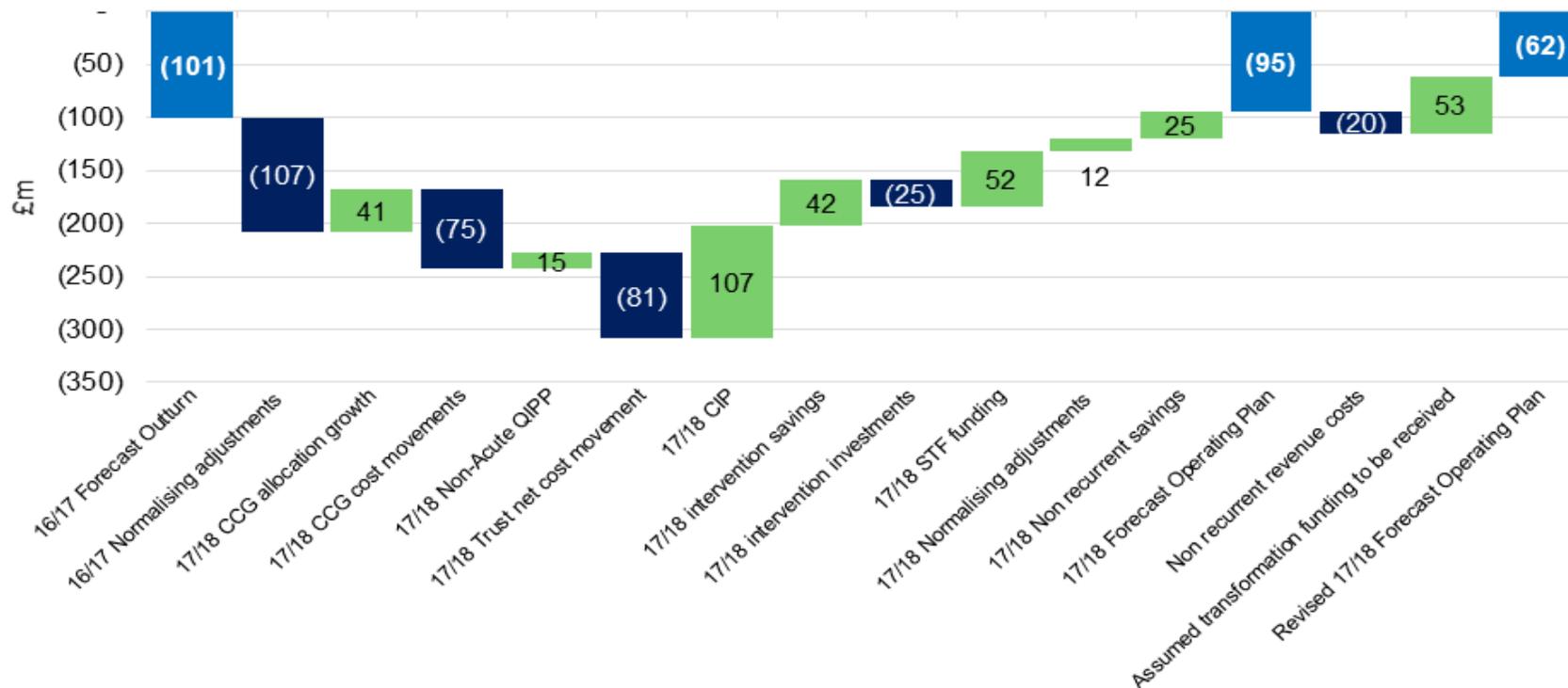
Draft NCL normalised forecast outturn 16/17 - 20/21



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Exhibit 14: Forecast 2016/17 outturn control total to 2017/18 forecast operating plan

### 16/17 Forecast Outturn Control Total to 17/18 Forecast Operating Plan



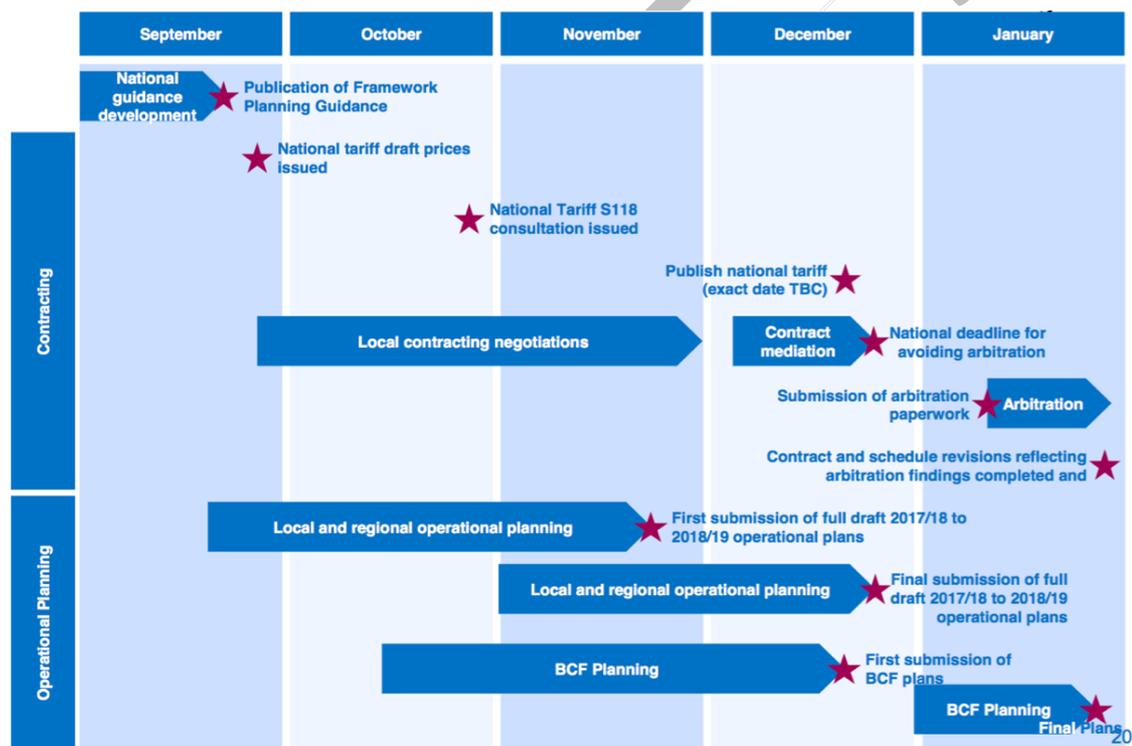
Note: The 16/17 in year FOT of £101m together with the £107m 16/17 normalizing adjustments represents the normalized 16/17 position excluding the specialist trusts (RNOH, T&P). Including the specialist trusts normalised 16/17 position (£8m) brings the combined 16/17 normalised deficit to £216m (shown in exhibit 13).

## 9 How we will deliver our plan

### 9.1 Delivery through 2 year contracts in NCL

Delivering the STP is a priority for health and care commissioners and providers in NCL - therefore it is essential that commissioning intentions and contracts reflect this. In line with national guidance, we are entering into a planning round for 2 year contracts covering 2017/18 and 2018/19. We will use this opportunity to ensure all contracts are strategically aligned to the STP, thus enabling its delivery. Whilst we recognise that implementation might look different in different local areas, we know that it will only be possible to deliver on the STP if we are all pulling in the same direction. Setting up 2 year contracts based around our STP delivery plans will both enable rapid implementation and support a longer term move to new relationships between commissioners and providers, reducing transactional costs and building the foundation for the development of new commissioning and delivery arrangements.

*Exhibit 15: High level plan for 2 year planning round to support delivery of the STP*



We have developed a proposed process and a set of draft principles for managing the contract negotiations that will take place over the next couple of months. Our leadership group will meet regularly (every 2 to 3 weeks) to ensure leadership alignment, assess progress on operating plans, and to ensure that the behaviours of teams reflect the agreed NCL approach.

We have agreed that operating plans and contracts will need to be strategically consistent with the STP. To achieve this, all finance and activity alignment will be overseen by the STP finance and activity modelling group, with overall plan alignment to be overseen by the NCL wide planning group led by the CCGs. All interim finance and activity submissions by CCGs and trusts between 21 October and 23 December should therefore be aligned across NCL

before submission. Whilst organisations will individually follow up queries with NHS England or NHS Improvement on 2017/18 control totals, no organisation will agree their individual target unless and until there is a pan-NCL plan agreed.

The risks of delivery of operating plans will be identified and jointly owned and managed, with the following principles:

- simplicity
- reducing transaction costs
- incentivising the changes in care delivery as set out in the STP
- incentivising the delivery in improved productivity as set out in the STP
- locating risk where it can best be managed
- an open book approach
- use of agreed sources of data.

In the current context of the financial position and management capacity across the system, we will ensure in the first 2 years of the STP that we are prioritising our efforts in the areas which will add the most value in terms of increasing health and wellbeing for people; improving the quality of care people receive; and ensuring value for tax payers' money. We will focus our energies on achieving maximum benefit and we will seek to identify areas where we can further and faster to build confidence and momentum.

We will identify resources to take forward areas of further potential benefit. In addition, we will set up a process for independent peer review challenge of all areas of discretionary spend in providers and CCGs to identify further opportunities to reduce or avoid spend and to aid the collective delivery of plans.

## 9.2 Decision making in the programme

The STP is a collaboration between a range of sovereign organisations in NCL, each with its own governance and decision-making structures. We have not to date introduced any collective decision-making structures. However we have worked together to produce both the Case for Change and the STP.

The STP is a work in progress and therefore has not been signed off by any of the organisations within the STP. We will take this STP through the public sessions of each of the NHS provider boards, CCG governing bodies and Local Authorities for their support and input into the next steps.

### 9.2.1 Collective governance arrangements for CCGs

Going forward, in order to support a more collaborative commissioning approach across NCL, the 5 CCGs will need a mechanism for collective decision making. Governing Bodies have recognised this requirement and have agreed the principle of establishing a joint NCL-wide governance structure for some elements of commissioning.

Further work is being done on the details of the proposed joint governance structure. Engagement on the design has been ongoing during October 2016 and will continue with further details to be presented at Governing Body meetings in November 2016.

### 9.3 Programme architecture

In coming together as an STP footprint, we have developed a governance structure, which enables NHS and local government STP partners to work together in new ways. The NCL STP Transformation Board brings together executives from all programme partners monthly to oversee the development of the programme. It has no formal decision making authority, but members are committed to steering decisions through their constituent boards and governing bodies. Three subgroups feed into the Transformation Board: the Clinical Cabinet, the Finance and Activity Modelling Group and the Transformation Group.

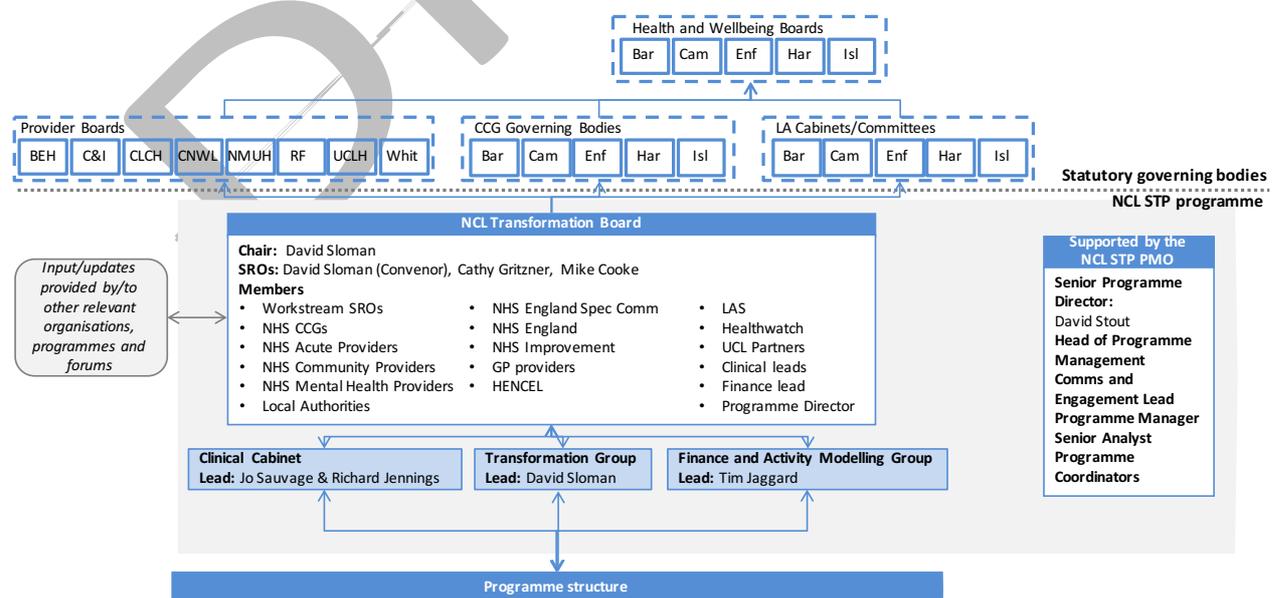
The Clinical Cabinet meets fortnightly to provide clinical and professional steer, input and challenge to all the workstreams as they develop. Membership consists of the 5 CCG Chairs, the 8 Medical Directors, clinical leads from across the workstreams, 3 nursing representatives from across the footprint, a representative for the Directors of Public Health and representatives for the Directors of Adult Social Services and the Directors of Children’s Services respectively.

The Finance and Activity Modelling Group is attended by the Finance Directors from all organisations (commissioners and providers). This group also meets fortnightly, to oversee the finance and activity modelling of the workstream plans as they develop.

The Transformation Group is an executive steering group made up of a cross section of representatives from all organisations and roles. This group is specifically responsible for driving progress between meetings of the Transformation Board, and meets fortnightly to do so. Membership includes the SROs of all workstreams.

Additionally, the NCL STP has a full time PMO which facilitates and coordinates the meetings of the main governance groups, as well as delivering communications and engagement support to the programme.

*Exhibit 16: NCL STP current governance structure*



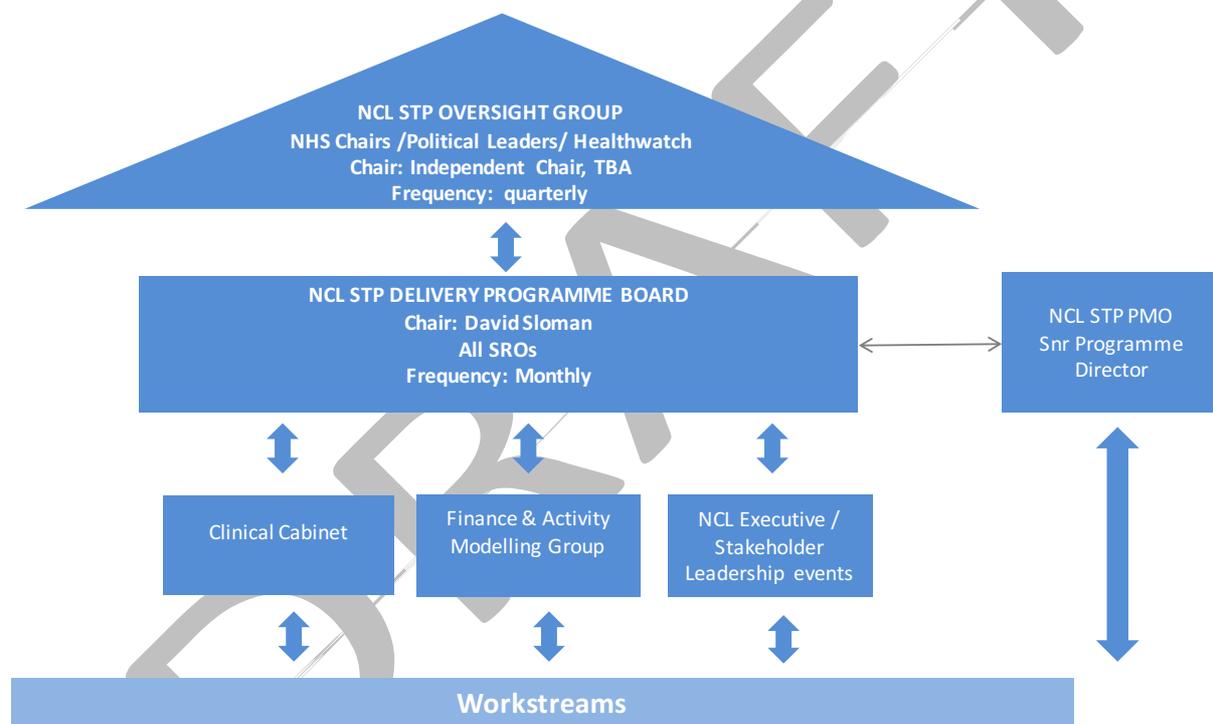
The component workstreams of the NCL STP feed into the overarching governance framework. The workstreams are responsible for developing proposals and delivery plans in the core priority areas. Every workstream has its own governance arrangements and meeting cycles which have been designed to meet their respective specific requirements, depending on the core stakeholders involved.

### 9.3.1 Future programme architecture

We recognise that as we move from planning to implementation that we will need to amend our programme architecture to ensure that it is fit for purpose. We will work with the Transformation Board to agree any required changes to the programme architecture so that we are ready to move forward with implementation from the new year.

Our initial proposal for discussion is set out in exhibit 17.

*Exhibit 17: Proposed future programme architecture*



This structure would comprise the following new groups:

- **STP Oversight Group:** This oversight group would be made up of Chairs and political leaders and would go some way to address the current ‘democratic deficit’ and representation of views of the local population. It is proposed that this group meet quarterly and might benefit from an appointed Independent Chair. Membership of this group would ensure scrutiny of the delivery of STP delivery and ensure a better connection with the NHS boards, governing bodies and local authority leadership.
- **STP Delivery Programme Board:** To drive and oversee the progression and delivery of the STP. It is proposed that the delivery board meet monthly. This would replace the Transformation Group.

- **Executive leadership events:** CEOs and other relevant executive directors and stakeholder representatives would meet periodically as requested by the Delivery Board in order to resolve delivery issues.

### 9.3.2 Health and wellbeing boards

CCGs are required to involve their local Health and Wellbeing Board (HWB) when preparing their commissioning plan so that HWBs can consider whether their draft plans take proper account of the local health and wellbeing strategy. As CCG commissioning plans will be set within the context of the STP, it will be important that we engage with HWBs as we develop the STP. Engagement of HWBs will also be an important means of ensuring engagement of local political leadership in the STP process.

### 9.3.3 Overview and scrutiny committees

Local authorities have a role in reviewing and scrutinising matters relating to the planning, provision and operation of health services in their local area. Commissioners and providers of NHS services (including NHS England, CCGs, NHS trusts, NHS foundation trusts and private providers) must consult the local authority where they are considering any proposal for a substantial development or variation of the health service in the area. Ordinarily, where the services in question are commissioned by NHS England or CCGs (as the case may be), the commissioners carry out this exercise on behalf of providers. Providers of public health services commissioned by the local authority are also required to consult the local authority in the same way as commissioners and providers of NHS services.

The local authority may scrutinise such proposals and make reports and recommendations to NHS England and the Secretary of State for Health. Legislation provides for exemptions from the duty to consult in certain circumstances, for example where the decision must be taken without allowing time for consultation because of a risk to safety or welfare of patients or staff. As part of the overview and scrutiny process, the local authority will invite comment from interested parties and take into account relevant information available, including that from Healthwatch.

We have a Joint Health Overview and Scrutiny Committee (JHOSC) in place across NCL which has already put the STP on its agenda as a standing item. We will ensure that we liaise closely with the JHOSC as the STP plans develop so that we can plan ahead for any likely need for public consultation. In addition, we will discuss plans with any relevant local authority overview and scrutiny committees as we move towards local implementation.

## 9.4 Programme resourcing

We have dedicated resources in place to support the delivery of the STP, with an agreed overall programme budget of £5m in 2016/17. Each workstream has a Senior Responsible Officer (SRO). Some workstreams have shared leadership, where a mixed skillset is required. All of these individuals are senior Executive level - Chief Executives, Medical Directors or Finance Directors - ensuring leadership of the highest quality. Each SRO is supported by a dedicated programme manager, and in some cases a broader team of support. A programme budget for 2016/17 has been allocated to each of the workstreams based on

their proposed requirements. STP partner organisations are also giving in kind to each of the workstreams to ensure high quality plans can be delivered at pace.

We will review the requirements for 2017/18 and beyond as we finalise the delivery plans and phasing of implementation. A £10m resource requirement to deliver the plan has been factored into our financial modelling.

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## 10 Engagement

We have come a long way since being asked to come together as 22 health and social care organisations with disparate views last December. It takes time to build trust and develop shared a shared vision of the future between people and organisations, and to get everyone working towards the same goals. We are now all aligned behind a collective agenda and are ready to share it more widely, seeking input and feedback on our draft plans to date.

The most important people we need to engage with are those who use our services – the residents of NCL. We have specifically created a shared core narrative for this purpose – ensuring it is in patient-focused and accessible in language to begin to involve people in the process. Now that we are in a position to communicate our collective thoughts effectively, our intention is to engage residents, local Councillors, our workforce and other key stakeholders to get feedback on our plans. We have held initial public meetings in each of the 5 boroughs to begin the process of co-design with patients, people who use services, carers, families and Healthwatch.

Our approach going forward will be to collaborate more extensively with people who use services and carers, local political stakeholders as well as members of the public, to ensure that our residents help inform our decisions. This approach is guided by the following core principles (often called the “Ladder of Citizen Participation”). We will undertake different types of engagement as set out on the ladder as appropriate:

1. ‘inform’ stakeholders
2. ‘engage’ with stakeholders in open discussions
3. ‘co-design/ co-produce’ services with stakeholders

Feedback from our local residents will be fundamental to our decision making and will help us shape the way the final plan is implemented.

### 10.1 Our future plans

We will now build on the success of our initial public engagement events by:

- holding a quarterly forum in each borough
- holding pan-NCL events on specific issues that may arise in support of the borough level events
- hosting meetings with the public on focussed topics such as urgent and emergency care, primary care, and mental health to get in-depth input from the community
- organising ‘Tweet chats’ on specific areas of interest
- developing a designated YouTube channel and populating it with relevant resources.
- using partner digital media channels – Twitter, Facebook, Instagram – to promote our public engagement programmes and information. We will also use these channels to test ideas and progress on local priorities which will help us develop our plans further.

To do this, we will:

- use Healthwatch, other patient representative groups and resident's associations, local authority engagement networks and the range of other networks available to reach out to the public and share our draft plans
- work in partnership with communications teams across NCL organisations and use their wide range of community channels to socialise the STP, for example Camden CCG's citizens' panel and Enfield's Patient Participation Groups Network.
- use existing online engagement tools that CCGs, local authorities and providers have to engage specific audiences and reach those who may be unable to attend our events.

We recognise it is crucial to ensure our local political stakeholders are actively involved in the oversight of the plans as they develop. We are planning on doing this by:

- planning regular face to face meetings between the STP leadership team and local councillors and MPs, along with Ministers in the Department for Health if required to seek their regular advice on all proposed changes
- continuing to share progress updates of the STP at all meetings at the Joint Health Overview and Scrutiny Committee (JHOSC) ensuring that all political channels through CCGs, local authorities and providers are kept fully briefed on the STP as it develops and any public concerns for the regular engagement they undertake with elected leaders
- logging all media stories and regularly updating the Transformation Board and those meeting with elected members on the STP as it develops, media development and any public concerns.

There is also a need to engage more of our own workforce in the planning process. We will do this via:

- the weekly STP newsletter that we have set up for those working within the organisations of the STP
- providing people working within our organisations with regular updates on progress through internal newsletters and bulletins, weekly / monthly updates from Chief Executives
- hosting sessions with a wider set of clinicians and social care practitioners to get their input into the priorities and delivery areas. This will include working with our GP Federations to engage primary care providers to ensure our workforce is a driver and owner of change
- running events within our membership organisations to showcase the range of work which is happening across NCL and to ensure staff understand the current plans, and how they may affect them as we progress into implementation.

We will continue to build our communications and engagement capabilities across the system. We are planning to host a workshop with communications leads from across sectors to co-design the future engagement strategy, having now identified the key audiences that we need to engage with across the 5 boroughs. The strategy will include the design of a programme of deliberative-style events which will bring together different groups to more

directly shape our plans. We will establish a designated communications and engagement workstream to oversee delivery of the strategy, with a Senior Responsible Officer for engagement.

## 10.2 Public consultation

A formal public consultation is not needed for every service change. However, it is likely to be needed should substantial changes to the configuration of health services in a local area be proposed as our plans develop and we are committed to ensuring we consult widely and effectively.

We are already beginning to develop a comprehensive picture of local views and concerns through our early engagement, building an extensive stakeholder and community database and contacts which will enable us to develop a detailed plan of those affected by any proposed changes.

We also have an existing relationship with both general and specialist media outlets (including digital). We are already working on STP stories with these stakeholders and will continue to do so whether formal consultation is required or not.

## 10.3 Equalities analysis and impact assessment

Under the Equality Act 2010, we are required to analyse the effect and impact of the NCL STP in relation to equality. We are committed to carrying out an equality impact assessment to ensure our plan does not discriminate against disadvantaged or vulnerable people, or other protected groups.

Our equality analysis will consider the effect on different groups protected from discrimination by the Equality Act to ensure any changes are fully effective for all target groups and mitigate against any unintended consequences for some groups. We are committed to undertaking an Equalities Impact Assessment as our plans become more fully developed.

We already have a good overview and analysis of equality information from across the NCL footprint through our existing and ongoing partnership work with the 5 local authorities, CCGs, providers and other representative organisations. We are building on local regular equality audits of residents, patients and staff to ensure good engagement with protected groups and others, so that we can better understand the actual or potential effect of changes to functions, policies or decisions through the STP. This will help us to identify practical steps to tackle any negative effects or discrimination, to advance equality and to foster good relations.

Throughout our engagement to date, and building on the insight above, we have taken advice on best practice to ensure that all our public facing work is as fully accessible as possible, including sharing information in a variety of formats to ensure our we are able to engage all our residents, using interpreters or Easy Read material where required. We will continue to hold events and meetings in accessible locations (accessible for people with disabilities and easily reached on public transport, with adaptations made for attendees’

communication needs). Our aim is to enable different groups to be fully involved as the STP progresses.

## 11 Conclusion and next steps

The STP is work in progress and we recognise that we have much more work to do to deliver the vision we have set out.

The immediate next steps between now and Christmas are to:

- to take steps to stabilise our financial position, developing more detailed ideas in the areas we have not yet fully explored
- agree the priorities for implementation in the first 2 years of the STP to ensure that we focus initially on the improvements which will make the most impact on our triple aims most quickly.

At the same time, we are clear that we will not lose focus on the longer term transformation that will support sustainability.

There remain many issues to resolve and we know we do not have all the answers. But we are determined to succeed and will continue to work with people who use services, the public and our staff to find solutions in the months and years ahead.

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# North Central London

## Sustainability and Transformation Plan

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### A summary

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## Introduction

Hospitals, local authorities, GPs, commissioners, and mental health trusts across north central London have all come together to transform the care we deliver to our patients.

On a scale never seen before, health and social care services in the region are working on the 'North and Central London (NCL) Sustainability and Transformation Plan (STP)'.

Our work covers the five boroughs of Camden, Islington, Haringey, Barnet and Enfield – an area that is home to nearly 1.5 million people.

We know that the health and social care needs of our local people are changing, and that there are serious issues facing health and care services in NCL. People receive different standards of care depending on where they live: waiting times for services and health outcomes vary, and the quality of care and people's experience of health and social services is sometimes not as good as it should be.

We must improve and we can only do this if we all work closely together – with each other and with our local residents.

It does not mean doing less for patients or reducing the quality of care provided. It means more preventative care - finding new ways to meet people's needs, and identifying ways to do things more efficiently. We want to ensure that everybody we care for has greater control of their health and wellbeing and receives the support they need to live longer, healthier lives. Many of these ambitions are not new, but are based on what local people have told us they want.

The plan is currently work in progress. We are looking to engage with as many people as possible over the next few months to develop our ideas further.

## What is the Sustainability and Transformation Plan (STP)?

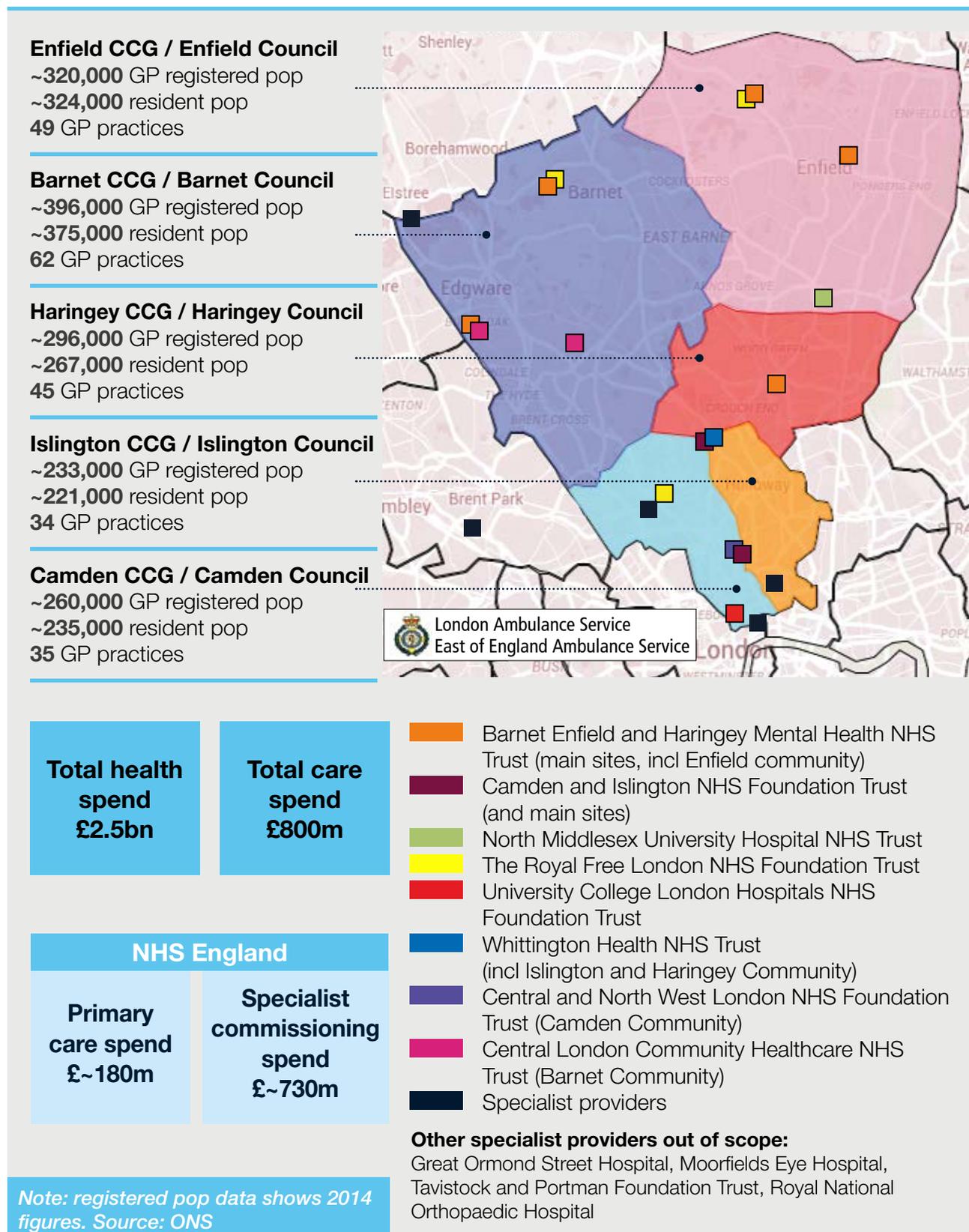
To make sure everybody receives the care they need when they need it, we have to change the way we do things.

Our draft plan sets out how we will work together to deliver high quality, sustainable services in the years to come and how we can meet the financial challenges and increasing pressures on our services over the next five years.

The North Central London area has a growing population and people are also living longer, often with long term health problems.

The growth in our funding over the next five years will not match the expected increases in population and the resulting growth in demand for health services. NHS services already have deficits and, if nothing changes, it is anticipated that the combined deficit of health services alone will be nearly £900million by 2020/21. Local authorities are also facing significant financial pressures on their social care budgets. We need to change how we provide services, reduce the amount of time and treatment spent in hospitals, boost prevention and offer more local people the care they need closer to home.

# North Central London overview



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## What are we going to do to?

There are a wide range of health problems in the region including high rates of childhood obesity and mental illness. Too many people are treated in hospital for long term conditions when they could be better cared for in the community. Waiting times to see a specialist and for diagnostic tests are long. Attendance levels at A&E departments are high and it's difficult to recruit staff. We want to create a health and social care system which delivers positive outcomes in all of these areas, no matter where you live.

### **To help us achieve this, over the next five years we aim to:**

- ▶ Invest more in prevention to stop people getting ill
- ▶ Work with people to help them remain independent and manage their own health
- ▶ Give children the best possible start in life
- ▶ Provide care closer to home so that people will only need to go to hospital when it is clinically necessary
- ▶ Give mental health services equal priority to physical health services
- ▶ Improve cancer services
- ▶ Make the best standards available to all and reduce variation
- ▶ Make north central London an attractive place to work so that we have the right workforce to deliver high quality services
- ▶ Modernise our buildings and make greater use of digital technology
- ▶ Ensure value for tax payers' money through increasing efficiency and productivity, and consolidating and specialising where appropriate

### Prevention

We aim to do more to promote and empower people to live healthy lives so we can stop the onset of disease, and keep people out of hospital. We want to increase investment in prevention and ensure that the places where people live and work promote good health.

We want to support residents, families and communities to look after their own health. We will work to diagnose residents with clinical risk factors and long term conditions much earlier to increase life expectancy.

## What will be different for patients

### Prevention and care closer to home

John, age 62 is a lifetime smoker who was recently diagnosed with chronic bronchitis. His GP advised him to stop smoking but John said he could not cope without his cigarettes and refused the offer of nicotine replacement therapy (NRT). John contracted a chest infection, went to A&E and was admitted. He stayed for several days and was given some NRT on the ward to cope with his cravings for cigarettes.

In future, when John is admitted to hospital his respiratory physician will discuss the importance of stopping smoking as a treatment for his bronchitis. He will be prescribed NRT to relieve his cravings and on discharge he will be offered a referral to specialist stop smoking support for heavily addicted smokers. John will then get a call the next day from the specialist stop smoking advisor who will arrange a home visit for the following day. John will be supported by the specialist advisor in weekly visits to help him to reduce or stop smoking altogether.



### Care closer to home

We aim to deliver more health and care closer to home, so that people are treated in the best possible environment and do not have to go to hospital unless they really need to.

This would be achieved through local networks which bring different services together and improving access to GPs or other primary care professionals.

We aim to provide 24/7 access to specialist opinion in primary care, ranging from an advice only service to admission to an acute assessment unit. We will also review the existing provision across NCL of GP presence in emergency departments.

We will look to develop special falls emergency response services to help support older people to remain at home after a fall, as well as helping to educate them about the risks.

## What will be different for patients

### GP services

Ms Sahni is 87 and has four chronic health problems. She currently has to book separate appointments with different doctors to have all of the relevant check-ups and appointments that she needs.

In future, Ms Sahni will be in a special “stream” of patients who will have all of their care co-ordinated by a very experienced GP. This will allow her to see the specialist heart or diabetic nurses at the integrated care centre at her GPs surgery. There will also be a care navigator in the team who can help sort things out for her at home including community support.



## Achieving the best start in life

Better education for children is crucial to our plan. We need to put health and wellbeing on the map at the earliest opportunity. We need to create healthy environments, promote active travel, sport and play in schools.

We have identified areas of focus – from prevention to acute care – which will improve health and outcomes for children and young people

This will include a focus on maternal health which evidence strongly suggests has an impact on child and adult health – for example obesity, diabetes and cardiovascular disease.

We want to address mental health in children as early as possible, supporting mothers with mental health problems both before and after birth. We also want to provide services for parenting support and health visiting which focus on vulnerable, high risk families.

## Mental health

We will give equal priority to physical and mental illness and aim to reduce demand on hospital care and mental health inpatient beds.

Our plans include increasing access to primary care mental health services and improving how we manage acute mental health problems, building community capacity to enable people to stay well; and investing in mental health liaison services – for example ensuring that more people in hospitals have their mental health needs supported. We will also look to strengthen perinatal and child and adolescent mental health services (CAMHS).

## What will be different for patients

### Mental health liaison

Maisie suffers from dementia, and is cared for by her husband Albert. Previously, after falling at home Maisie was admitted to hospital. Due to the accident and change of surroundings, Maisie was agitated and more confused than normal.

In future, as the hospital will have Core 24 liaison psychiatry, the liaison team will be able to help the hospital support both Maisie’s physical and mental health needs. As Maisie will receive holistic care it will mean that she is ready to be discharged sooner than if only her physical health needs were supported. Maisie’s husband Albert will also be supported by the dementia service, allowing him to continue to care for Maisie at home.



## Urgent and emergency care

Over the next five years, we aim to provide a consistent urgent and emergency care service. Patients should be seen by the most appropriate professional for their needs, which may include directing them to an alternative emergency or urgent care service. There is strong evidence that getting patients to the right specialist service, even if that might not be their local hospital, improves outcomes.

We want to develop high quality ambulatory care services across NCL – so patients can be assessed, diagnosed, treated and able to go home on the same day without needing a hospital admission.

For those patients who do need emergency treatment, we aim to have services in place that help them to leave hospital as quickly as possible and rehabilitate closer to their home if appropriate

## Planned care

We want to reduce variation in the way that we deliver planned care across north central London. This includes some key areas for improvement, such as making sure patients can access the right expertise locally and that their experience of surgery is seamless, smooth and efficient.

We aim to have clear ‘pathways’ for patients across the region, with consistent approaches, so that we become more efficient and there is less variation in outcomes and experience.

We want to improve patients’ access to information and help people manage conditions without surgical intervention where possible. We will ensure patients spend as little time as possible in hospital.

## Cancer

Our aim is to save lives and improve patient experience for people who have cancer. The priority areas we have identified for improvement are getting earlier diagnosis and better provision of radiotherapy and chemotherapy.

Targeting colorectal and lung cancers are a particular focus given the high percentage of patients receiving late stage diagnosis, often in emergency departments.

We are also developing a case for a single provider model for radiotherapy in NCL.

We want to improve palliative care so that patients have a better quality of life in their final weeks.

## What will be different for patients

### Cancer

Previously Margaret, aged 60, went to see her GP with persistent gastric pain for several weeks. She was otherwise well, and did not have reflux, diarrhoea, vomiting or weight loss. Over the course of the next three weeks, Margaret's GP organised tests and ruled out any inflammation, heart problem, or gallstones that could cause the pain. He gave Margaret tablets to try to reduce inflammation from acid on her stomach lining. However, Margaret's pain was more persistent this time and she was still worried.

In the new system, Margaret's GP will be able to refer her to a Multidisciplinary Diagnostic Centre at UCLH despite the fact that her symptoms are not considered "red flag". Here, Margaret will be assessed for vague abdominal symptoms. A clinical nurse specialist will see her four days after referral. The team will identify that Margaret has early stage pancreatic cancer and because it was picked up early she can access potentially curative keyhole surgery.



### Social care

Social care is a crucial part of many elements of our plan, in particular in delivering care closer to home and improving mental health services. We want to ensure that health and social care services work well together to deliver well-coordinated care for local people. We will improve collaboration between local authorities and hospitals – for example, focusing on earlier discharge of hospital patients where safe and appropriate. We will build on the experience and expertise of social care and public health in the development of new models of care.

We recognise that many social care providers of services such as residential, nursing home and home care services are under great pressure. We aim to focus on strengthening the supply of the workforce for these services to address risks around their staffing capacity.

The role of social workers will also be essential to delivering our model for health and care closer to home, in addition to the role of home care workers, personal assistants and the blended role between district nurses and care workers. We will focus on recruiting to these posts and developing career opportunities in these areas.

### Bringing services together

We will work out where it makes sense to bring services together or create networks across organisations to improve the experience of our patients. We are already collaborating across the region with positive results in cardiac/cancer; pathology; neurosurgery; stroke; and many other services.

We can learn from our experience in these areas and more work is planned to identify areas where some form of consolidation may be worth considering.

## Workforce

We want to attract the highest quality staff to deliver the best possible care we can for local people. Therefore as well as creating the most positive environment for our patients, we want NCL to be a place where we offer the best opportunities for people to develop their careers.

Our aim is to attract, develop and retain people who work in and support health and social care in north central London. We want to create attractive careers with a workforce fit for purpose in the changing healthcare landscape – so we have the right skills in the right place for patients.

## Digital and estates

We want to use the power of digital communications and IT systems to share information and support the provision of better care and treatment for patients. We aim to promote changes so that patients can use technology to receive and share information, get treatment and prescriptions through e-referrals and e-consultations. Sharing high quality data between health and care professionals will mean people don't have to retell their stories. Digital technologies will help ensure care is delivered in the right place at the right time by the right person.

We also want to modernise the buildings we work from and our equipment to make sure they are fit for purpose. We already have major investments planned at University College Hospital and Chase Farm Hospital and would look to develop plans for investment to improve facilities so we can deliver more care closer to home and improve mental health services.

## Reducing costs

We think the changes we have set out will help us reduce waste in the health and care system. **For example we can reduce cost of care by:**

- treating people right first time and improving the co-ordination of services.
- avoiding unnecessary admissions to hospital .
- speeding up discharge when people are ready to go home.
- being less reliant on agency and temporary staff.
- avoiding unnecessary duplication of services between organisations.

However our plans at the moment do not achieve financial balance over the next five years, so we will continue to look for other opportunities to improve our efficiency.

## Engagement

We are committed to being open and transparent about our plan as it develops. We need engagement from all of our partners, patients and local residents if we are to succeed

### This means:

- ▶ Early engagement on the issues before any decisions are made
- ▶ Stakeholders and the public help to devise the solution
- ▶ Ensuring decision-making is transparent and people know what to expect when
- ▶ Each stage of the process is informed by ongoing dialogue.

As we add more detail to our plans, we will ensure that we undertake formal public consultation where appropriate. We will work with the North Central London Joint Health Overview and Scrutiny Committee to agree when we need to do this and how we best do this.

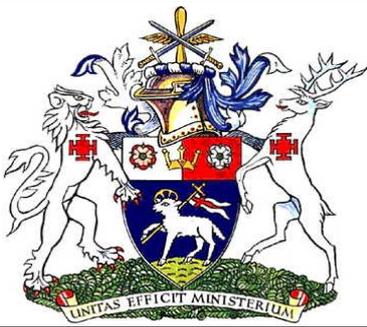
## Next steps

The draft Sustainability and Transformation Plan sets out our proposed approach to achieve sustainable health and care services in north central London. It is still work in progress. There is much more to do before we finalise the detail of these plans.

We want to fully engage patients and the public in our thinking to make sure we get this right. The various NHS organisations and local authorities will be looking at this draft plan over the next few months and they will arrange events to raise awareness of the proposals and get people's feedback.

In the meantime if you want to feed in ideas or comments please contact the NCL STP office at [nclstppmo@nhs.net](mailto:nclstppmo@nhs.net)

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## Policy and Resources Committee

1 December 2016

<b>Title</b>	<b>Referral from Full Council 1 November 2016 – Opposition Motion in the name of Councillor Mittra</b>
<b>Report of</b>	Head of Governance
<b>Wards</b>	All
<b>Status</b>	Public
<b>Enclosures</b>	None
<b>Officer Contact Details</b>	Kirstin Lambert, Governance Team Leader <a href="mailto:kirstin.lambert@barnet.gov.uk">kirstin.lambert@barnet.gov.uk</a> , 020 8359 2177

### Summary

The report informs the Policy & Resources Committee of an opposition motion referred from Full Council meeting of 1 November 2016. Council Procedure Rule 23.5 states that “If the Member's Motion is not dealt with by the end of the meeting, it will be referred to the appropriate Council Committee or sub-Committee for consideration and any necessary action”. An opposition motion from Councillor Mittra on ‘Royal British Legion "Count Them In" Campaign: Making the next census count for our Armed Forces community’ has been referred to Policy & Resources Committee under this rule. Details of the motion are contained in this report.

### Recommendation

**That the Policy and Resources Committee instructions are required in relation to this item.**

## **1. WHY THIS REPORT IS NEEDED**

- 1.1 On 1 November 2016 Councillor Arjun Mittra submitted an Opposition Motion to Full Council on Royal British Legion "Count Them In" Campaign: Making the next census count for our Armed Forces community.
- 1.2 The motion has been referred to Policy and Resources Committee for consideration under Council Procedure Rule 23.5.
- 1.3 The full text of the motion is as below:

**Council places on record its gratitude for the courage, service and sacrifice of members of Her Majesty's armed forces, past and present, during military conflicts, in countering terrorism and in carrying out peacekeeping and humanitarian duties.**

### **Council notes:**

- **The obligations it owes to the Armed Forces community within the Borough of Barnet as enshrined in the Armed Forces Covenant; that the Armed Forces community should not face disadvantage in the provision of services and that special consideration is appropriate in some cases, especially for those who have given the most.**
- **The absence of definitive and comprehensive statistics on the size or demographics of the Armed Forces community in Barnet. This includes serving Regular and Reserve personnel, veterans, and their families.**
- **That the availability of such data would greatly assist the Council, local partner agencies, the voluntary sector, and national Government in the planning and provision of services to address the unique needs of the Armed Forces community in Barnet.**

### **Council therefore resolves to:**

- **Support and promote The Royal British Legion's campaign 'Count Them In' to include a new topic in the 2021 census that concerns military service and membership of the Armed Forces community.**
- **Urge Barnet's elected members to sign up as individual supporters to the 'Count Them In' campaign.**
- **Ask the Leader of the Council and the Leader of the Opposition to jointly write to the Secretary of State for Defence, setting out the Council's position that we wish to see the UK Parliament approve a**

**final census questionnaire in 2019, which includes questions concerning our Armed Forces community, for use in the 2021 Census.**

- **Ask the interim Chief Executive to write to the Borough's three Members of Parliament, and the Assembly Member for Barnet & Camden, asking them to also make representations on this matter to the Secretary of State for Defence.**

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 No recommendations have been made. The Policy and Resources Committee are therefore requested to give consideration to the motion and provide instruction.

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 Not applicable.

## **4. POST DECISION IMPLEMENTATION**

- 4.1 Post decision implementation will depend on the decision taken by the Committee.

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

- 5.1.1 If the committee propose to action in relation to this motion, any actions arising will need to be evaluated against the Corporate Plan and other relevant policies.

### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

- 5.2.1 None in the context of this report.

### **5.3 Legal and Constitutional References**

- 5.3.1 Council Constitution, Responsibility for Functions, Annex A – the terms of reference of the Policy and Resources Committee includes:

‘(1) To be the principal means by which advice on strategic policy and plans is given and co-ordinated and to recommend to Full Council, as necessary, on strategic issues... (2) To be responsible for the overall strategic direction of the Council...and (5) To consider and take any necessary action upon proposals for new legislation, Bills before Parliament, Acts of Parliament and other proceedings before Parliament affecting or likely to affect the interests of the Borough or its inhabitants generally where not the specific concern of any other committee(s).’

5.3.2 There are no legal references in the context of this report.

#### 5.4 **Risk Management**

5.4.1 None in the context of this report.

#### 5.5 **Equalities and Diversity**

5.5.1 All of these issues must be considered for their equalities and diversity implications.

#### 5.6 **Consultation and Engagement**

5.6.1 None in the context of this report.

### 6. **BACKGROUND PAPERS**

6.1 Minutes of the meeting of Full Council, 1 November 2016.

	<p align="center"><b>Policy and Resources Committee</b> <b>1 December 2016</b></p>
<p align="right"><b>Title</b></p>	<p><b>Policy and Resources Committee Work Programme</b></p>
<p align="right"><b>Report of</b></p>	<p>Interim Chief Executive</p>
<p align="right"><b>Wards</b></p>	<p>All</p>
<p align="right"><b>Status</b></p>	<p>Public</p>
<p align="right"><b>Enclosures</b></p>	<p>Committee Work Programme: December 2016</p>
<p align="right"><b>Officer Contact Details</b></p>	<p>Kirstin Lambert: <a href="mailto:kirstin.lambert@barnet.gov.uk">kirstin.lambert@barnet.gov.uk</a> 020 8359 2177</p>

<b>Summary</b>	
The Committee is requested to consider and comment on the items included in the 2016-17 work programme	

<b>Recommendations</b>	
1. That the Committee consider and comment on the items included in the 2016-17 work programme	

## **1. WHY THIS REPORT IS NEEDED**

- 1.1 The Policy and Resources Committee's Work Programme 2016-17 indicates forthcoming items of business.
- 1.2 The work programme of this Committee is intended to be a responsive tool, which will be updated on a rolling basis following each meeting, for the inclusion of areas which may arise through the course of the year.
- 1.3 The Committee is empowered to agree its priorities and determine its own schedule of work within the programme.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 There are no specific recommendations in the report. The Committee is empowered to agree its priorities and determine its own schedule of work within the programme.

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 N/A

## **4. POST DECISION IMPLEMENTATION**

- 4.1 Any alterations made by the Committee to its Work Programme will be published on the Council's website.

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

- 5.1.1 The Committee Work Programme is in accordance with the Council's strategic objectives and priorities as stated in the Corporate Plan 2015-20.

### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

- 5.2.1 None in the context of this report.

### **5.3 Legal and Constitutional References**

- 5.3.1 The Terms of Reference of the Policy and Resources Committee is included in the Constitution, Responsibility for Functions, Annex A.

### **5.4 Risk Management**

- 5.4.1 None in the context of this report.

### **5.5 Equalities and Diversity**

- 5.5.1 None in the context of this report.

5.6 **Consultation and Engagement**

5.6.1 None in the context of this report.

6. **BACKGROUND PAPERS**

6.1 None

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**London Borough of Barnet  
Policy and Resources Work  
Programme (Nov)  
November 2016 - May 2017**

Contact: Kirstin Lambert; 02083592177 [kirstin.lambert@barnet.gov.uk](mailto:kirstin.lambert@barnet.gov.uk)

Title of Report	Overview of decision	Report Of ( <i>officer</i> )	Issue Type (Non key/Key/Urgent)
5 October 2016			
Council Motion (4 April 2016) - Impact of the EU Referendum on Barnet	Following Council resolution of 4 April 2016, the committee will consider the impact of the result of the EU Referendum on Barnet.	Interim Chief Operating Officer	<b>Non-key</b>
Customer Transformation Programme	This report seeks approval for the establishment of a programme of work to implement the recommendations of the Customer Access Strategy (CAS).	Director of Strategy, Innovation and Customer Services	<b>Key</b>
Sustainable Design and Construction and Draft Residential Design Guidance Supplementary Planning Documents	The refocused SPD's capture changes on space standards as well as new standards that address accessibility, security, energy, noise, air pollution and water conservation. The Residential Design SPD cross references these changes and also clarifies the approach to conversions including small HMO conversions. It is recommended these documents are considered for adoption following consultation.	Commissioning Director, Growth and Development	<b>Non-key</b>
IT Strategy	To note the council's IT Strategy 2015-2020.		<b>Non-key</b>

Title of Report	Overview of decision	Report Of ( <i>officer</i> )	Issue Type (Non key/Key/Urgent)
Business Planning - Efficiency Plan Submission	To approve the 'Efficiency Plan' for submission to the Department for Communities and Local Government (DCLG).	Director of Resources (Deputy Section 151 Officer)	<b>Non-key</b>
Business Planning updates 2016-17	To approve virements to and from the contingency fund.	Director of Resources (Deputy Section 151 Officer)	<b>Non-key</b>
1 December 2016			
Business Planning	To approve the Business Planning priorities for the period 2016/17 to 2019/20.	Director of Resources (Deputy Section 151 Officer), Interim Chief Operating Officer	<b>Non-key</b>
Annual Procurement Forward Plan [APFP] 2017/2018	Approve the Annual Procurement Forward Plan 2017-18.	Interim Chief Operating Officer	<b>Key</b>
Diving Feasibility Study (Barnet Copthall Leisure Centre)	A feasibility study reviewing the inclusion of diving in the facility mix at the redeveloped Copthall Leisure Centre.	Commissioning Director (Adults and Health)	<b>Key</b>
Disabled Persons Freedom Pass Review	To receive the outcomes from the consultation, proposed appeals procedure and a progress update on the introduction of the revised criteria.	Commissioning Director Environment	<b>Key</b>

Title of Report	Overview of decision	Report Of ( <i>officer</i> )	Issue Type (Non key/Key/Urgent)
Pentavia retail park	To consider adoption of Pentavia retail park planning brief following consultation.	Commissioning Director, Growth and Development	<b>Non-key</b>
Short term Extension of the Barnet Group Management oversight for Streetscene	Report to extend The Barnet Group senior management oversight of the Street Scene Delivery Unit (DU) to align with the Streetscene ADM.	Commissioning Director Environment	<b>Key</b>
North Finchley Town Centre Area Framework SPD	Authorisation to prepare a draft Supplementary Planning Document (SPD) for North Finchley Town Centre Area Framework, to come back to Policy and Resources Committee for approval for consultation.	Commissioning Director, Growth and Development	<b>Key</b>
North Central London (NCL) Sustainability and Transformation Plan (STP)	The Committee is asked to comment on Barnet's roles and contribution to the developments across North Central London (NCL).	Commissioning Director Adults and Health	<b>Non-key</b>
Motion referred from Council - Opposition Motion in the name of Cllr Arjun Mittra	To consider a motion referred from Council on Royal British Legion "Count Them In" Campaign: Making the next census count for our Armed Forces community.	Head of Governance	<b>Key</b>

10 January 2017

Title of Report	Overview of decision	Report Of ( <i>officer</i> )	Issue Type (Non key/Key/Urgent)
The Way we Work programme: Full Business Case for electronic document management, Office 365 and Unified Communication Solutions	Approval of the full business case to implement a new approach to EDM, Office 365 and UC using allocated capital budget.		<b>Non-key</b>
23 February 2017			
Corporate Enforcement and Prosecution Policy	The proposed corporate policy will ensure there is a consistent approach to enforcement and prosecution by the council and any other organisation delivering regulatory/enforcement services on behalf of the council. Therefore ensuring Council compliance with the Cabinet Office Enforcement Concordat and the Statutory Code for Regulators introduced in 2014.	Commissioning Director Environment	<b>Non-key</b>
Business Planning 2015/16 to 2019/20	The report revises the Medium Term Financial Strategy (MTFS) in line with the publication, sets out the corporate plan indicators, savings proposals, capital programme for the period 2017-20 and council tax for 2017/18.	Director of Resources (Deputy Section 151 Officer), Interim Chief Operating Officer	<b>Non-key</b>

Title of Report	Overview of decision	Report Of ( <i>officer</i> )	Issue Type (Non key/Key/Urgent)
North London Waste Plan (Reg 19 stage)	To approve the North London Waste Plan (NLWP) for public consultation.	Commissioning Director, Growth and Development	<b>Non-key</b>
Golders Green Station Planning Brief - adoption	To approve the planning brief following consultation.	Commissioning Director, Growth and Development	<b>Non-key</b>
Final Corporate Plan - Addendum 2017-18	To approve the Corporate Forward Plan addendum.	Chief Operating Officer (Director of Finance / Section 151 Officer)	<b>Non-key</b>
<b>21 March 2017</b>			
Draft Green Infrastructure Supplementary Planning Document	To approve the draft Supplementary Planning Document for Green Infrastructure for consultation.	Commissioning Director, Growth and Development	<b>Non-key</b>
Draft Affordable Housing Supplementary Planning Document	To approve the draft Supplementary Planning Document for Affordable Housing for consultation.	Commissioning Director, Growth and Development	<b>Non-key</b>
The Barnet Group (TBG) Business Plan	To approve the budget and business plan of the Barnet Group Ltd.	Interim Chief Operating Officer	<b>Non-key</b>
<b>16 May 2017</b>			
<b>27 June 2017</b>			

Title of Report	Overview of decision	Report Of ( <i>officer</i> )	Issue Type (Non key/Key/Urgent)
The Local Plan	To approve Barnet's Local Plan for consultation.	Commissioning Director, Growth and Development	<b>Key</b>
Items to be allocated			
Affordable Housing Supplementary Planning Document - Adoption	To adopt the Supplementary Planning Document for Affordable Housing.	Commissioning Director, Growth and Development	<b>Key</b>
Green Infrastructure Supplementary Planning Document - Adoption	To adopt the Supplementary Planning Document for Green Infrastructure.	Commissioning Director, Growth and Development	<b>Key</b>

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