Comhairle Ceantair an Iúir, Mhúrn agus an Dúin
Newry, Mourne and Down District Council

June 20th, 2019

Notice Of Meeting

You are requested to attend the meeting to be held on **Monday, 17th June 2019** at **6:00 pm** in **Mourne Room, Civic Centre Downpatrick.**

Chairperson Liz Kimmins

Vice Chairperson Mark Gibbons

Cllr G Bain

Cllr S Doran

Cllr H Gallagher

Cllr G Malone

Cllr L McEvoy

Cllr K McKevitt

Cllr G O'Hare

Cllr B Ó Muirí

Cllr M Ruane

Cllr M Savage

Cllr Taylor

Cllr Trainor

Cllr Walker

Agenda

1.0 Apologies & Chairperson's Remarks

2.0 Declarations of Interest

3.0 To agree a starting time for Active and Healthy Communities

4.0 Action Sheet arising from AHC Meeting held on Thursday 21 March 2019

5.0 Presentation by Outdoor Recreation Northern Ireland Walking Trails SLA

Directors Papers

6.0 Gating Lanes to Mitigate Anti-Social Behaviour

7.0 AHC Business Plan 2019/20

Community Engagement

8.0 District Electoral Area (DEA) Fora Update Report

9.0 Financial Assistance SLA/FMA

10.0 Peace IV Local Action Plan

11.0 Logistical Support for Events

12.0 Enforced Closure Compensation for Community Associations

13.0 Financial Assistance Call 2/3

Leisure and Sports

14.0 Approval to go to Business Case/Design for Kilbroney Pitches

15.0 Community Trail Plans SLA with ORNI 2019/20

16.0 Carlingford Park Play Area

17.0 Kilkeel River Walk Lights

18.0 Leasing of Council Land known as Rosconnor Playing Fields, Strangford Playing Fields and the Back Pitch, Greenbank, Newry

---

Health & Wellbeing

19.0 Membership of Action Renewals Association

20.0 Nomination on All Party Group on Sustainable Development

21.0 Nominations to Health Working Groups

Southern Trust

South Eastern

22.0 Motor Neurone Disease Charter

23.0 Consultation on Stroke Services

24.0 Consultation on Breast Screening Services

25.0 Consultation report on Model Licence Conditions under the Caravans Action (NI) 1963

26.0 Terms of Reference for Sustainability and Climate Change Forum

---

Notices of Motion

27.0 Notice of Motion referred from the Council Meeting Monday 3 June 2019 Council Meeting

Notice of Motion received from Councillor Brown referred from the Council Meeting Monday 3 June 2019

'This Council will adopt a ‘suicide down to zero’ approach to combating the high

prevalence of suicide across our district. It commits to closer partnership working with local mental health and suicide prevention charities and will establish a suicide prevention working group with a dedicated Council officer responsible, meeting quarterly with representation from all party groupings and the necessary resources to develop and implement a strategy to deliver the commitment of bringing suicides in the district down to zero.

The Council will establish a new small grants scheme within the existing financial assistance programme to fund projects specifically dealing with mental heath and suicide in the district, the criteria and performance of which will be drawn up by the working group and monitored by the Active and Healthy Communities Directorate.

Council will also write to the Permanent Secretary of the Department of Health lamenting the abject failure of the Department to implement the Protect Life 2 strategy, and that this strategy should have been signed off regardless of the absence of an Executive given its vital lifesaving and non-contentious nature.'

28.0 Notice of Motion referred from Monday 3 June 2019 Council Meeting

Notice of Motion received from Councillor Clarke referred from the Council Meeting Monday 3 June 2019

'This council will introduce a policy to ensure council buildings and leisure centres with vending machines, will replenish them with healthy choice snacks and drinks and will reduce the availability of high-sugar items such as sweets, high sugar fizzy drinks and high fat snacks. Furthermore, council will encourage other partner organisations on the community planning partnership board to follow the example of council and implement similar interventions within their organisations, these measures will assist us in tackling obesity, creating "nudge" strategies to facilitate healthier choices to help people to change their diet.'

For Noting - Leisure & Sports

29.0 Relocation of existing resources at Carnbane Youth Pitches

30.0 Closure of Swimming Pools

31.0 Sport NI Your School Your Club Funding

For Noting - Health & Wellbeing

32.0 Affordable Warmth Scheme

For Noting - Community Engagement

33.0 Newry Neighbourhood Renewal Partnership (NRP) Report

34.0 Policing and Community Safety Partnership (PCSP) Report

35.0 Areas at Risk Funding for Bessbrook and Crossmaglen

36.0 South Armagh/South Down Peace Centre

For Noting - Director

37.0 Schedule of Scheme of Delegation

38.0 Terms of Reference for Committee and Working Groups

Items deemed to be exempt under paragraph 3 of Part 1 of Schedule 6 of the Local Government Act (NI) 2014

39.0 Castlewellan Community Centre Lease

This item is deemed to be restricted by virtue of para.3 of part 1 of schedule 6 of the Local Government Act (NI) 2014 – information relating to the financial or business affairs of any particular person. The public may, by resolution, be excluded during this item of business

Invitees

Cllr Terry Andrews	terry.andrews@nmandd.org
Cllr Gregory Bain	gregory.bain@nmandd.org
Mr Alan Beggs	alan.beggs@nmandd.org
Cllr Patrick Brown	patrick.brown@nmandd.org
Cllr Robert Burgess	robert.burgess@nmandd.org
Cllr Pete Byrne	pete.byrne@nmandd.org
Mrs Dorinnia Carville	dorinnia.carville@nmandd.org
Cllr charlie casey	charlie.casey@nmandd.org
Cllr William Clarke	william.clarke@nmandd.org
Cllr Dermot Curran	dermot.curran@nmandd.org
Ms Alice Curran	alice.curran@nmandd.org
Cllr Laura Devlin	laura.devlin@nmandd.org
Mr Eoin Devlin	eoin.devlin@nmandd.org
Ms Louise Dillon	louise.dillon@nmandd.org
Cllr Sean Doran	sean.doran@nmandd.org
Cllr Cadogan Enright	cadogan.enright@nmandd.org
Cllr Hugh Gallagher	hugh.gallagher@nmandd.org
Cllr Mark Gibbons	mark.gibbons@nmandd.org
Mr Kieran Gordon	kieran.gordon@nmandd.org
Cllr Oonagh Hanlon	oonagh.hanlon@nmandd.org
Cllr Glyn Hanna	glyn.hanna@nmandd.org
Mr Liam Hannaway	liam.hannaway@nmandd.org
Cllr Valerie Harte	valerie.harte@nmandd.org
Cllr Harry Harvey	harry.harvey@nmandd.org
Mr Conor Haughey	conor.haughey@nmandd.org
Cllr Terry Hearty	terry.hearty@nmandd.org
Mrs Janine Hillen	janine.hillen@nmandd.org
Cllr Roisin Howell	roisin.howell@nmandd.org
Cllr Liz Kimmins	liz.kimmins@nmandd.org
Cllr Mickey Larkin	micky.larkin@nmandd.org
Cllr Alan Lewis	alan.lewis@nmandd.org
Mr Michael Lipsett	michael.lipsett@nmandd.org
Cllr Oonagh Magennis	oonagh.magennis@nmandd.org
Mr Conor Mallon	conor.mallon@nmandd.org
Cllr Gavin Malone	gavin.malone@nmandd.org
Cllr Cathy Mason	cathy.mason@nmandd.org
Colette McAteer	colette.mcateer@nmandd.org
Cllr Declan McAteer	declan.mcateer@nmandd.org
Cllr Leeanne McEvoy	leeanne.mcevoy@nmandd.org
Cllr Harold McKee	harold.mckee@nmandd.org
Patricia McKeever	patricia.mckeever@nmandd.org
Cllr Karen McKevitt	karen.mckevitt@nmandd.org

Mr Roland Moore	roland.moore@nmandd.org
Ms Carmel Morgan	carmel.morgan@nmandd.org
Cllr Roisin Mulgrew	roisin.mulgrew@nmandd.org
Cllr Barra Ó Muirí	barra.omuiri@nmandd.org
Linda O'Hare	linda.o'hare@nmandd.org
Cllr Gerry O'Hare	gerry.o'hare@nmandd.org
Cllr Henry Reilly	henry.reilly@nmandd.org
Cllr Michael Ruane	michael.ruane@nmandd.org
Cllr Michael Savage	michael.savage@nmandd.org
Cllr Gareth Sharvin	gareth.sharvin@nmandd.org
Donna Starkey	donna.starkey@nmandd.org
Cllr Gary Stokes	gary.stokes@nmandd.org
Sarah Taggart	sarah-louise.taggart@nmandd.org
Cllr David Taylor	david.taylor@nmandd.org
Cllr Jarlath Tinnelly	jarlath.tinnelly@nmandd.org
Cllr John Trainor	john.trainor@nmandd.org
Central Support Unit	central.support@nmandd.org
Cllr William Walker	william.walker@nmandd.org
Mrs Marie Ward	marie.ward@nmandd.org

ACTIONS OUTSTANDING FROM PREVIOUS ACTIVE & HEALTHY COMMUNITIES MEETINGS

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
AHC/040/2018	Willie Maley Statue	It was agreed to allow officers to develop proposals including potential costs, sources of funding and any likely capital commitment from Council and to contact all potential partners in relation to location and funding options.	C Haughey	**Sports development working with ERT staff to seek possible funding for this project**	N
AHC/043/2018	Lease of Land to St John Bosco	It was agreed to proceed with a 25 year lease at a peppercorn rent, with an option for St John Bosco GAC to renew for a further 25 years, subject to Department for Communities approval.	F O'Connor	**The Department has now approved the disposal by Lease at a peppercorn rent. The proposed Lease sits with the representatives of the Bosco and it would be anticipated that the Lease will be completed within the next 14-21 days**	N
AHC/052/2018	Apologies & Chairperson's Remarks	It was agreed that officers investigate potential ways of recognising the contribution made by carers in the District and bring a paper with proposals back to a future Committee Meeting.	E Devlin	**To future meeting**	N
AHC/069/2018	Multi-Sports Facility Sports Hub	It was agreed to submit expressions of interest applications for the 3 Sports Hubs (Newry Leisure Centre, St Peter's GAA, Warrenpoint and Tollymore FC, Newcastle), recommended within the study to Sport NI Multi-Sports Funding Stream.	P Power	**Ongoing**	N
AHC/147/2018	Wi-Fi in Community Centres	It was agreed to approve Council Officials to complete a business case for the provision of Wi-Fi at 7 Council owned Community Centres and to proceed to work with the IT Department to procure, appoint and implement the Wi-Fit Project.	J Hillen	**Contract to be awarded for all Council Wi-Fi installation at end of February 2019. Subject to full delivery of the WAN project (required in advance on the Wi-Fi project) and no unexpected delays in tender award, it is anticipated by the IT Projects Group (ITPG) that Wi-Fi in Community Centres**	N

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
				could be delivered approx. 6 months after contract award.	
AHC/163/2018	Kilbroney Park Sports Hub	It was agreed that officers be permitted to develop the project to a point where funding could be sought.	C Haughey	**Ongoing – feasibility study complete and estates to work on design drawings**	N
AHC/206/2018	Community Trails ORNI	It was agreed to approve, in principle, to contribute capital funding of up to £393,633.75, for the development of the trails at Drumkeeragh, Tievnadarragh, Corry Wood, Seaforde Planting and Annsborough Link as ORNI can secure funding through TRPSE and RDP.	C Haughey	**Match funding is now provided for 4 community trials to the value of £280k Updated by report** AHC/206/2018 **Ongoing, however costs to council is now reduced due to sport additional funding included**	N
AHC/213/2018	No 16 The Square, Rostrevor	It was agreed to note the contents of the officer's report, to accept the projected costs of the works and proceed.	J Hillen	**Drawings and costings being prepared by White,Young, Greene**	N
AHC/221/2018	Warrenpoint Community Centre Feasibility Study	It was agreed to: • Accept the recommendations within the feasibility report for Warrenpoint Community Facility including preferred location (Clonallon Park); • Proceed with a green book appraisal, assessing the two design options for Clonallon Park contained within the report.	J Hillen	**Drawing options complete and its now been written into green book appraisal.**	N
AHC/224/2018	Remedial Works at Mullaghbane CC	The remedial works at Mullaghbane Community Centre were agreed, subject to a suitable business case being established.	J McCann	**Business Case complete. Tender exercise underway closing 10th May 19.**	N
AHC/260/2018	New Down Leisure Centre Handball and Squash Provision	It was agreed to note the verbal update on the current situation regarding the new Down Leisure Centre Handball and Squash Provision.	K Gordon C Mallon	**Ongoing**	N

ACTION SHEET ARISING FROM AHC MEETING HELD ON 21 MARCH 2019

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
AHC/038/2019	Action sheet of the Active & Healthy Communities Committee Meeting held on Monday 18 February 2019	It was agreed to note the action sheet.	D.Services	**Noted**	Y
AHC/039/2019	District Electoral Area (DEA) Fora Update.	it was agreed to note the report and agree the action sheets from the following DEA Forum Private Meetings: • Rowallane DEA Forum Private Meeting held on Thursday 20 December 2018. • The Mournes DEA Forum Private Meeting held on Tuesday 8 January 2019. • Crotlieve DEA Forum Private Meeting held on Tuesday 15 January 2019. • Downpatrick DEA Forum Private Meeting held on Tuesday 12 February 2019. • Slieve Croob DEA Forum Private Meeting held on Tuesday 12 February 2019. • Slieve Gullion DEA Forum Private Meeting held on Tuesday 19 February 2019. • Rowallane DEA Forum Private Meeting held on Wednesday 27 February 2019.	D. Brannigan	**Progress ongoing**	Y
AHC/040/2019	Peace IV Local Action Plan	It was agreed to note the report and agree the minutes from the PEACE IV Partnership meeting held on Thursday	J McCabe	**Noted**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		31 January 2019.			
AHC/041/2019	Revised Financial Assistance Policy and Procedure	It was agreed to accept recommendations that the revised policy be implemented in conjunction with the online Grant Management System. The more notable changes to existing process include: • Immediate procurement and implementation of an online system • Assessment process • Verification of projects • Risk Assessment/Monitoring and Evaluation document • Sanctions	J. McCabe	**Ongoing**	Y
AHC/042/2019	Financial Assistance Call 1 2019/20	It was agreed to accept the following recommendations: • Approval to fund applications in Call 1 for the 2019-2020 periods as per the Appendices. • Approval for Financial Assistance Call 2 (subject to the confirmation of budgets).	J McCabe	**Letters of Offer Call 1 issued to groups Call 2 closing Monday 13 May 2019**	
AHC/043/2019	Saintfield Community Centre – FMA Agreement with Saintfield Community Trust	It was agreed to accept the officer's recommendation to agree to proceed with the development of a Facility Management Agreement with Saintfield Development Trust and the formal handover of the Community Facility and Indoor 3G pitch.	J McCann	**FMA has been completed and sent to the group via the programmes unit.**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
AHC/44/2019	Physical Activity Referral Scheme	It was agreed to accept the officer's recommendation to agree to option 3 as set out in 2.3 of this report: • Proceed with implementing new regional PARS delivery model with an additional staffing member for the South Eastern Area to mirror the Southern Area delivery model • Council to contribute an estimated £15k per annum which is currently not budgeted for (Southern Area and South Eastern Trust to provide additional funding up to the required £33k)	K Gordon	**On-going**	N
AHC/045/2019	Autism Friendly pool times in Down Leisure Centre	It was agreed to approve early closure of Downpatrick pool opening times on a Sunday to facilitate the Autism Friendly Sessions on an initial trial period from 7 April 2019 to 30 June 2019 (12 sessions).	S.Geary	**Actioned**	Y
AHC/046/2019	Site Specific Memberships – Ballymote and Newcastle	It was agreed to proceed with option 2 as set out in section 2.2 of the officer's report, and implement new proposed pricing model in Newcastle Centre and Ballymote Sports and Wellbeing Centre	K Halliday/ S Geary	**Actioned**	Y
AHC/047/2019	House Hold Membership Bolt On	It was agreed to accept the officer's recommendation as follows: • New household bolt on membership category - £15 per month for DLC, KLC AND NLC and £10 per month for Ballymote and Newcastle • For leisure centre members who have	K McConnell	**Actioned**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		an active membership account, a discounted rate of £1.50 for 4-15 year olds for swimming access (i.e. saving of 90p compared to normal admission price)			
AHC/048/2019	Mary Peters Trust Financial Assistance	It was agreed to provide a donation of £800.00. This donation would be provided with the understanding that this would be the final financial support from Council and no support would be granted to the trust in 2020 as Council would continue with its own Elite Athlete Scheme	P Power	**Complete**	Y
AHC/049/2019	Kiltybane Amenity Area Toilet Facility	It was agreed to accept the officer's recommendation for the new £30,000 budget and the realignment of the overall capital budgets for this facility.	D.Crilly	**Complete**	Y
AHC/050/2019	Relocation of Newry Mitchells	It was agreed to re-locate Newry Mitchells to utilise Derryleckagh Playing Fields on Wednesday, Friday and Sunday of each week from 1 April 2019 to 31 March 2020 and subject to annual renewal thereafter.	D Crilly	**Ongoing**	N
AHC/051/2019	Capital Scheme Approvals	It was agreed to approve the listed projects within both the Sports Facility Strategy and Play Strategy to be tendered and delivered within five-year programme.	D Crilly	**Complete**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
AHC/052/2019	Peace IV Shared Spaces Programme	It was agreed to use the Council land and gain support to develop new Peace IV shared spaces projects in ten areas across the District.	D Crilly	**Complete**	Y
AHC/053/2019	Transforming Health, Preventing Disease – Project Fund Proposal	It was agreed to accept: • the joint Health programme in order to introduce a health service for clients/patients to a wide range of physical activities and opportunities. • the recruitment of the two client support officers.	C Haughey	**Ongoing**	N
AHC/054/2019	Breastfeeding Welcome Here Phase 2	It was agreed to approve phase 2 buildings as set out in the officer's report of Council joining the Breastfeeding Welcome Here Scheme.	E O'Hagan	**E O'Hagan liaising with the centre managers to arrange a date for training to bring implement phase 2.**	Y
AHC/055/2019	Static Holiday and Touring Caravan Sites License Conditions	It was agreed to consider the amended Residential and Static Holiday and Touring Caravan Sites License Conditions and agree to adopt these conditions for licensed sites in the District from 1 April 2019..	S Murphy	**Actioned**	Y
AHC/056/2019	Transferring function to Council from Northern Ireland Housing Executive in April 2019	it was agreed to recommend: • Council approves that the Active and Healthy Communities Committee assumes responsibility for recommending to Council in the determination of all matters under the House in Multiple Occupation (HMO) Act NI 2016, except for those which are proposed to be delegated to the Director	J Cambell	**Documents signed by Chief Executive and returned**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		of Active and Healthy Communities and Assistant Director of Health and Wellbeing. • Council authorises the staff listed in appendix 1 to carry out the function.			
AHC/057/2019	Transfer of Houses in Multiple Occupation (HMO): Service Level Agreements	It was agreed to approve the signing of the Service Level Agreements contained within the report and that the Chief Executive sign on Council's behalf.	J Campbell	**Actioned**	Y
AHC/058/2019	Transfer of Houses in Multiple Occupation Standard Conditions and Tackling Anti-Social Behaviour	It was agreed to recommend that committee endorse the proposed Standard Conditions and the proposed approach to tackling Anti-Social Behaviour as attached in Appendix 1 and 2 respectively to this report.	J Campbell	**Actioned**	Y
AHC/059/2019	Update on Transfer of Houses in Multiple Occupation: Fees and Fixed Penalty Notices.	It was agreed to approve the following recommendations: • Note the update information regarding the fees for the Houses of Multiple Occupation licensing function; • Agree to set a fee of £37 per person per annum in respect of an application for a HMO licence; • Agree to additional fees for an application to vary a licence of £185, and those for supplying a certified copy from, or of, the register of £15; • Note the information regarding the use of Fixed Penalty Notices as enforcement functions that are available to the Council under the Houses in Multiple Occupation (HMO) Act NI 2016;	J Campbell	**Actioned**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		• Agree the value of any fixed penalty notices that may be issued as set out in Appendix 1			
AHC/060/2019	Consultation response to the Food Standards Agency (FSA) on amending allergen information provisions contained within domestic food information legislation for food prepacked for direct sale(PPDS)	It was agreed to agree to the attached response being provided in relation to the FSA's consultation on amending allergen information provisions contained within domestic food information legislation for food prepacked for direct sale, namely, the attached consultation response proposing Policy option 3 – Mandate name of the food and allergen labelling on packaging of food prepacked for direct sale.	S Murphy	**Actioned**	Y
AHC/061/2019	Notice of Motion - Cycling	It was unanimously agreed that this council recognises the multiple health, environmental, social and economic benefits of cycling and commits to itself to encouraging cycling. These are to be brought about by; practically encouraging cycling within and between our towns through the re-designation of some pathways as well as safer cycle corridors within our towns, working with external organisations to encourage recreational participation and safety measures such as 'stayin' alive at 1.5'. It also acknowledges the recent study by the Department of Infrastructure that notes – regardless of being of primary or post-primary age, or whether they are urban or rural dwellers – the excessively	M Lipsett	**Report to future AHC Meeting**	N

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		low numbers of children who cycle to school. Council commits to working with external agencies to explore ways in which cycling, and other active means of transport, can be promoted and increased within our district.			
AHC/062/2019	Notice of Motion – Gating Lanes to Mitigate Anti-Social Behaviour	It was unanimously agreed that Council notes that its published policy for applications to gate lanes to mitigate anti-social behaviour gives responsibility to the PCSP to coordinate the required inter-agency action. Council further notes that the PCSP has no procedures to implement this policy, no criteria to respond to such requests, and no budget to implement it. Council notes therefore that there is currently no procedure for residents or police to request lane closures in areas that are not NIHE estates. Council notes that gating lanes requires permission from the 3 emergency services, NI Water, Roads and the NIHE and Council where relevant. Any of these may request a standard format key to be used. Council directs that; • The Active and Healthy Directorate to recognise either petitions from 90% of residents, or letters from the NIHE, PSNI or Fire Service as the criteria for triggering a formal request for inter-agency consideration	M Lipsett	**Report to Future AHC Meeting**	N

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		and action via the PCSP. • To produce a written procedure for PCSP to follow in reflecting Council policy. • The Policy and Resources Directorate to provide the PCSP with access to a small annual budget for capital projects to effect this policy and these new procedures.			
AHC/063/2019	Newry Tennis Bubble	It was agreed to note the contents of the report.	Democratic Services	**Noted**	Y
AHC/064/2019	Angling report update	It was agreed to note the contents of the report.	Democratic Services	**Noted**	Y
AHC/065/2019	Summer Scheme Update	It was agreed to note the contents of the report.	K Gordon	**Noted**	Y
AHC/066/2019	Flooding at Jim Steen Park, Newtownhamilton	It was agreed to note the contents of the report	Democratic Services	**Noted**	Y
AHC/067/2019	Downpatrick Neighbourhood Renewal Partnership (NRP) Report	It was agreed to note the contents of the report.	D Brannigan	**Noted**	Y
AHC/068/2019	Newry Neighbourhood Renewal Programme Application for Funding for DfC for two External Storage	It was agreed to note the contents of the report.	D Brannigan	**Noted**	Y

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
	Units				
AHC/069/2019	Transfer of Houses in Multiple Occupation: Memorandum of Understanding (MOU) between Department for Communities (DfC) Housing Division and lead Councils	It was agreed to note the Memorandum of Understanding contained within the report.	Democratic Services	**Noted**	Y
AHC/070/2019	Public Health Checks in Community Facilities	It was agreed to note the contents of the report.	Democratic Services	**Noted**	Y
ITEMS RESTRICTED IN ACCORDANCE WITH PART 1 OF SCHEDULE 6 OF THE LOCAL GOVERNMENT ACT (NI) 2014					
AHC/071/2019	Lease Agreement with Castlewellan Community Partnership	It was agreed to approve Council officers investigating all possibilities which will satisfy the funding body requirements and the needs of Castlewellan Community Partnership Council officers to draft necessary documentation and Business Case, as required.	J McCann	**Draft lease has been forwarded to the assoc and SIF for their comments.**	N
AHC/072/2019	Ballyholland Community Centre	it was agreed that Council procure a suitably qualified contractor to carry out the remedial works required for the simplification of the pellet feed system, at a cost outlined in para 3.1 of the officer's report. This is subject to Ballyholland Development Association satisfying Council that all the conditions of the letter of offers relevant to the	J McCann	**Estates dept have been asked to engage White, Young Greene to work up drawings to allow a tender process to be undertaken. Meeting has been arranged for 30th April with the association and Cllrs with the C. Assoc to discuss outstanding letter of offer issues**	N

Minute Ref	Subject	Decision	Lead Officer	Actions taken/ Progress to date	Remove from Action Sheet Y/N
		development of initial scheme are being met.			

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Gating Orders
Reporting Officer (Including Job Title):	Michael Lipsett Director of Active and Healthy Communities
Contact Officer (Including Job Title):	James Campbell Head of Environmental Health (Residential)

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	Further to a Notice of Motion the purpose of this report is to consider the role of the Council in the making of Gating Orders and to agree to adopt the attached procedure.
2.0	**Key issues**
2.1	When it is desirable to tackle the behavioural aspects of crime and anti-social behaviour it may be possible to protect communities by taking physical steps and installing gates to restrict access. • District Councils are empowered to make Gating Orders. • The relevant legislation is Part 6A of the Roads (NI) Order 1993 (the 1993 Order), as amended by section 1 of the Clean Neighbourhoods and Environment Act (Northern Ireland) 2011 ("the 2011 Act"). • DOE has produced a detailed Guidance document on Gating Orders (appendix 2) • Before making such an Order, Councils must be satisfied that certain criteria are met. • It is the role of the Promoter (requester) to undertake most of the preparatory work relating to a gating order and to provide the council with the evidence that this work has been done. It is the responsibility of the promoter to physically provide the gates The detailed Guidance provided by DOE identifies who may act as promoter for such schemes and where responsibility for the provision of gates and future maintenance requirements lie. The PCSP currently provides advice and support as appropriate to any potential promoter. The Partnership has responsibility for, and works in partnership with, organisations who can offer further insight and understanding of the underlying causes of an issue in a local area, which could subsequently assist in identifying the most effective and sustainable response, from physical or social type responses to short, medium and longer-term solutions. This also allows for identification of where alley gates may not be the appropriate solution to a problem, and potentially easier to evaluate benefits, outcomes and improvements.

3.0	**Recommendations**
3.1	**That the Committee agree to the use of the procedure in appendix 1 when applications are made to Newry Mourne and Down District Council for gating orders**
4.0	**Resource implications**
4.1	There is currently no budget for installing gates to restrict access.
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	Officers confirm due regard to rural needs has been considered;
7.0	**Appendices**
	Appendix1 -Procedure for making a Gating Order Appendix 2 DOE Guidance on Gating Orders
8.0	**Background Documents**
	None

Appendix 1

Step procedure within Newry Mourne and Down District Council when a Promoter approaches the Health and Wellbeing Department regarding Gating Orders.

1. Health and Wellbeing Department Officers must assess using the evidence provided by the Promoter and any other evidence of crime and anti-social behaviour in the area and must be satisfied that gating the road will contribute to its reduction.
2. Before the decision to gate a road, Newry Mourne and Down District Council needs to clarify whether the road's status legally allows it to be subject to an order. This clarification comes from consultation with the Department of Infrastructure (DfI). If the road is not a public road then it cannot be the subject of a gating order and the process ceases.
3. Prior to publishing a proposal informal discussion will occur with the Promoter and the Health and Wellbeing Department. This confirms any opposition to gating orders and permits the Promoter to consider mitigation and Council to cease the process before spending resources if necessary.
4. A formal consultation with the community will then be carried out by the Health and Wellbeing Department.
5. Officers must be satisfied that all issues relating to equality have been considered and addressed by the Promoter if they are a public body. If they are not a public body, then responsibility for screening and any Equality Impact Assessment (EQIA) falls to Newry Mourne and Down District Council.
6. The Order must be publicised in the Belfast Gazette and once at least in each of 2 successive weeks in one or more local papers. The proposed Order must also be available to be inspected by any interested person/s. A copy of the draft Order and Notice must also be served
7. Assessing representations from the public and from organisations e.g. statutory undertakers, gas or electricity providers. By working in partnership to ensure the consensus is positive it will usually not be necessary for a local inquiry.
8. Gating order taken to Health and Wellbeing Committee for approval to issue Order.
9. Publicise order and ensure emergency services have access to accurate maps.
10. Review Order on annual basis to assess that gate is acting as a useful crime or anti-social behaviour tool.

Department of the
Environment
www.doeni.gov.uk

GATING ORDERS

Guidance on Part 6A of the Roads (Northern Ireland) Order 1993

INTRODUCTION

1. Anti-social behaviour (ASB) and crime can often be exacerbated by the very nature of our surroundings. Crimes such as graffiti, burglary and drug dealing can thrive in areas that lack people and visibility. This problem is often exemplified by secluded roads e.g. alleyways and entries, that allow crime and anti-social behaviour to take hold. If this happens, it results in a degenerative impact against the community as a whole and deters people from using the road further, thereby encouraging further crime and ASB.

2. While it is always desirable to tackle the behavioural aspects of crime and anti-social behaviour, it may be possible to protect communities by taking simple physical steps that do not allow roads to be exploited in this manner. One such solution is the use of 'gating orders' under Part 6A of the Roads (NI) Order 1993 (the 1993 Order), as inserted by section 1 of the Clean Neighbourhoods and Environment Act (Northern Ireland) 2011 ("the 2011 Act").

3. This guidance has been produced by the Department of the Environment. It is not statutory guidance, but is intended to assist district councils who wish to make use of the powers available to them to make gating orders to help tackle crime and ASB. Further information on Gating Schemes is contained in the Alleygating Information Manual produced in 2007 by Belfast City Council and Bryson Charitable Group as part of their contribution to the Belfast Alleygating Pilot project[1]. Councils may wish to familiarise themselves with the content of the Manual.

NEW PART 6A OF THE ROADS (NI) ORDER 1993

4. The 2011 Act inserts new Part 6A (Articles 69A to 69E) into the 1993 Order. These new provisions allow action to be taken quickly, easily and with a degree of flexibility not previously available. District councils will be able to make, vary or revoke gating orders in respect of relevant roads (as defined in Article 69A(5) of the 1993 Order) affected by crime or ASB within their area, permitting a gate to be installed at each end of the

[1] http://www.belfastcity.gov.uk/communitysafety/Docs/Alleygatingmanual.pdf

road. The orders are an effective way of enabling councils to restrict public access to any relevant road by gating it (at certain times of the day if applicable), without removing its underlying road status.

5. Councils require the approval of the Department for Regional Development ("DRD") to -

- make a gating order; or
- vary a gating order so as to further restrict any public right of way over the road to which the order relates.

In order to seek DRD approval, the council should contact the relevant Roads Service Section Office.

DRD approval is not required to –

- vary a gating order so as to reduce the restriction imposed by it; or
- revoke a gating order.

DRD is likely to withhold approval for a gating order only where there is a public interest in retaining rights of passage; where there are road safety concerns or where the proposed gating order would create traffic management concerns

Conditions for making a gating order

6. In general, rights of way do not cause or facilitate crime. The provisions in the 2011 Act are framed in a way that limits their use to roads where it can be shown that persistent crime or anti-social behaviour is expressly facilitated by the use of certain rights of way.

7. The Department considers that these powers will be particularly important in enabling the closure of those roads where they are demonstrably the source of crime in built-up areas. The rationale behind the formulation of these powers was to assist in urban areas and, in practice, if a road is the only means of access to the rear of a terrace of properties, it may well be easier to demonstrate whether the road itself is facilitating persistent crime, than in an open rural setting,

where there might be a number of means of access to premises.

THE ROLE OF THE PROMOTER

8. Whilst it is open to anyone to initiate a gating order scheme, the involvement of the community as a whole will be required to bring about a successful scheme. Therefore, the initiative is likely to come from a group within the local community such as a residents group, voluntary body or a community safety partnership, perhaps working in partnership with a statutory agency. The person or group who initiates the scheme is referred to as the 'Promoter'. The Promoter must be, or nominate a person to act as, the single point of contact with the district council to deal with any queries or complaints that may arise during the planning, implementation and post-implementation stages.

9. The district council and DRD's Roads Service need to be consulted at the outset to obtain their agreement in principle to the scheme. The residents' desire to improve the amenity of their area by reducing crime and anti-social behaviour needs to be carefully balanced against the public interest in retaining rights of passage. Consultation with the council at the outset is primarily to ensure that the council is aware of the proposal to request a gating order as early in the process as possible. Seeking the council's agreement in principle at this early stage will enable the council to make any fundamental objections to the proposal known so that they can be dealt with at that stage and the proposal can be withdrawn or amended accordingly without further time being wasted. Obtaining the council's agreement in principle will not guarantee that the gating scheme will ultimately be successful as it could fail at one of the later stages in the process.

10. Roads Service may have reservations from a road safety or traffic management viewpoint. Roads Service will also need to confirm that the road is adopted as if it is not adopted, a gating order cannot be made under Article 69A of the 1993 Order. The contact is the appropriate Roads Service Section Office. If Roads Service does not agree in principle to the scheme, the scheme will not proceed.

11. The Promoter must arrange for a comprehensive consultation with all local residents and property owners who will be affected by the scheme. Residents in the vicinity may also need to be consulted if they use the road as a through route to shops, schools, etc. The form of the consultation process is left to the discretion of the Promoter. It may take the form of letter drops, public meetings, door-to-door visits, etc or a combination of such measures. However, a notice should be given to each resident/property owner explaining the details of the scheme, including the proposed access arrangements and the arrangements for resolving disputes. They should also be asked for their agreement in writing to the scheme including an undertaking that no work will be carried out in the road that may hinder access, e.g. the erection of greenhouses, sheds, etc. Roads must be left clear for access by all residents, service providers and the emergency services at all times.

12. Roads Service will continue to have access for inspection and maintenance purposes. Others needing access, apart from local residents, must be identified to ensure that gates are opened at designated times, e.g. for refuse collection purposes, through a nominated person identified through the consultation process.

Consultations

13. There is also a need to consult with service providers (e.g. BT, NIE, Water Service, etc), the emergency services and other persons who may require access and to seek their agreement to the proposal. Some of these may require unrestricted access to the road and this can be achieved via keys being allocated to the appropriate personnel within that service.

14. Consultations with the Police Service for Northern Ireland should be made at local Divisional level. The consultation process is likely to be time consuming and not without its difficulties. There may be problems in identifying the owners of property or those persons, other than residents, who require access. However, the importance of undertaking a thorough and comprehensive consultation cannot be stressed too strongly. Failure to properly consult at the outset may jeopardise the scheme at a later stage. Councils may wish to

use the newly established Police and Community Safety Partnerships (PCSPs) as a means of progressing schemes.

Planning Approval

15. The Promoter is responsible for obtaining any planning permission that may be needed in connection with the proposed gates.

Amenity Impact Assessment

16. An Amenity Impact Assessment will justify the scheme and also be used to help prioritise schemes. The Amenity Impact Assessment should set out:

- the nature and scale of the problems that the scheme is intended to address. This should include police data and an analysis of recorded crimes and incidents and/or evidence of community surveys/consultations, etc; and
- how the scheme will improve the amenity of the area and not lead to a decrease in the amenity of adjoining areas.

Equality Issues

17. Following the consultation exercise, the Promoter will need to consider whether there are any equality issues involved in taking forward a gating order scheme. This will include determining whether the proposed gating order will have a differential impact on any of the categories listed in section 75 of the Northern Ireland Act 1998 e.g. will children be prevented from accessing a play area as a result of the gating order? If the Promoter is a public body, they will need to take a decision on whether an Equality Impact Assessment ("EQIA") is required. As a first step, the gating order scheme should be 'screened' to determine if there is a need for a full EQIA to be undertaken. If the Promoter is not a public body, responsibility for undertaking the equality screening and any necessary EQIA will rest with the council. However, the Promoter will still need to consider any equality issues highlighted by the consultation and propose ways to address them. This information can then be provided to the council to assist with the completion of the formal screening and EQIA.

Further information on EQIAs can be found in the Equality Commission's publication "Practical Guidance on Equality Impact Assessment"[2].

18. Special consideration must be given to the impact the potential order might have on users of the road who have a disability. If a decision is taken to proceed with the order, the needs of people with disabilities must continue to be borne in mind throughout the process. For example, steps must be taken to ensure that alternative routes are free from obstructions and are suitably paved and during the installation of the gates, consideration should be given to the height of the locks and the ease with which they can be opened and closed.

Human Rights

19. The Promoter will also need to consider any Human Rights implications and taking into account the responses to the consultation exercise, must ensure that any individual's rights will not be threatened by the proposed gating order scheme.

Regulatory Impact Assessment

20. The Promoter should consider if the proposed gating order scheme will impose costs on business, charities or voluntary organisations. Details about such impacts are likely to emerge during the consultation stage and it is particularly important that any small businesses likely to be affected by the proposal are consulted. If the scheme does have an impact, a Regulatory Impact Assessment (RIA) may be required. If the Promoter is a public body they will be responsible for undertaking any RIA if required. If the Promoter is not a public body, responsibility for the RIA falls to the council. Information on costs and benefits can be found on the website of the Department for Business Innovation and Skills[3].

[2] http://www.equalityni.org/archive/pdf/PracticalGuidanceEQIA0205.pdf
[3] www.berr.gov.uk/policies/bre/consultation-guidance/impact-assessment

Gates

22. The Promoter is responsible for providing the gates and arranging for their installation. The Promoter is also responsible for the future maintenance of the gates. With this in mind, the Promoter must take out and maintain adequate insurance cover in the event of any public liability claims arising in connection with the presence or operation of the gates. The Promoter must provide the district council with confirmation from Insurers that the gate(s) and any associated structures are covered, throughout the period they remain in place. It will be a matter for a Promoter to obtain an appropriate level of cover for the associated risks, and in cost terms, there is an onus on the Promoter to obtain best value for money, whilst maintaining the correct cover for the circumstances.

23. Care should be taken in the design of the gates to ensure that they:

    - are robust;
    - are not easily breached or climbed;
    - are user friendly, taking into account the needs of disabled persons;
    - give unrestricted views of the road when closed;
    - open inward so as not to obstruct any adjacent road or footpath;
    - require little maintenance; and
    - are not unpleasing to the eye.

    Many of the gates already erected in Northern Ireland have the Police Accreditation of "Secured By Design". This ensures that the gate has been tested and meets the minimum security requirements of the PSNI.

24. The design and erection procedures must be checked by a Chartered Civil/Structural Engineer and certified as safe and fit for purpose. The certification must include the structure(s) that the gate(s) are to be erected on.

25. If the erection of the gates or any associated structures involve excavations in or breaking up the surface of the road a separate consent under Article 78 of the 1993 Order will be required for this aspect of the work. This will include the payment of a monetary deposit, which is refundable on the satisfactory completion of the works. An application form can be obtained from the DRD Roads Service Section Office.

Locks and Keys

26. A number of individuals and groups will have legitimate reasons to pass through the gates. These can include, but are not limited to, property owners and occupants, statutory undertakers, telecommunication companies, utility companies, the emergency services, Roads Service officers and their agents on business and council officers on business. The Promoter is responsible for providing the locks and keys and for their distribution and should therefore, early in the gating order process, undertake an assessment of the likely number of individuals needing keys to enter the particular road subject to the gating order. Consideration should be given to the issue of master keys to certain bodies such as the emergency services

27. Once a scheme has been implemented the residents must not change the lock or the pattern of the operating key, except with the district council's approval. Damaged locks must be replaced by locks which accept an identical key to the original.

Funding

28. The district council will meet the cost of making the gating order. Roads Service will continue to be responsible for the cost of maintaining the road which has been gated. The Promoter is responsible for the cost of the gates, locks, keys, insurance and all other expenses involved.

Monitoring Arrangements

29. Once the gates have been erected, the Promoter should put in place arrangements for monitoring the effectiveness of the scheme and maintaining the gates, locks and keys. The district council will also assess the ongoing arrangements and

may vary or revoke the gating order if necessary or appropriate.

STEP BY STEP GUIDANCE FOR DISTRICT COUNCILS

New Part 6A of the 1993 Order (see pages 33-37) empowers district councils to make gating orders. Before doing so, councils must be satisfied that certain criteria have been met, certain procedures have been followed and certain documentation is in place. It is the role of the Promoter to undertake most of the preparatory work relating to a gating order (see paragraphs 8 to 29 above) and to provide the council with evidence that this has been done and with any supplementary documentation that the council requires. In practice, it is likely that the Promoter will have been liaising closely with the council throughout the process and there may even be cases where the council is the Promoter of the scheme. However, it is ultimately up to the council to satisfy itself that all the appropriate procedures have been followed, all necessary impact assessments, etc have been carried out and any necessary approvals have been obtained before proceeding with a proposal to make a gating order.

STEP 1: DOES THE ROAD FACILITATE CRIME OR ANTI-SOCIAL BEHAVIOUR?

1.1 Article 69A(3) of the 1993 Order sets out the conditions that must be met before legal procedures for making an order can be implemented. The conditions are that:

- premises adjoining or adjacent to the road are affected by crime or ASB;
- the existence of the road is facilitating the persistent commission of criminal offences or ASB; and
- it is in all circumstances expedient to make the order for the purposes of reducing crime or ASB.

1.2 These requirements ensure that gating orders can only be used in roads that are experiencing or triggering crime or ASB. Gating orders cannot be used for other purposes. District councils should make an assessment using the evidence provided by the Promoter and any other relevant evidence of crime and ASB in the area, and must also be satisfied that gating the road will contribute to its reduction.

1.3 The final requirement that "it is in all circumstances expedient to make the order for the purposes of reducing crime or ASB", is slightly more complex and is considered in more detail in Step 4.

1.4 District councils should also be satisfied that –

- residents and members of the public who use the road will not be inappropriately inconvenienced by its gating; and
- alternative access routes exist.

Consideration of other tools to tackle crime and ASB

1.5 Gating orders are not the only solution to tackling crime and ASB on certain thoroughfares. Before proposing an order, district councils should give consideration as to whether there are alternative interventions that may be more appropriate (and cost effective) for tackling the specific problems they are facing without having to gate the road. Nevertheless, gating orders should not be seen as a last resort.

1.6 It is also possible in certain circumstances to gate roads without using a gating order, i.e. by extinguishing the public right of way over the road by means of an Abandonment Order made by DRD. Further information on Abandonment can be obtained from the local Roads Service Section Office.

STEP 2: CAN THE ROAD BE GATED?

2.1 Before the decision can be made to gate a road, district councils need to clarify whether the road's status legally allows it to be subject to an order. Article 69A of the 1993 Order allows any "relevant road" to be subject to a gating order. This is defined by Article 69A(5) of the 1993 Order as a road other than:

- a special road;
- a trunk road;
- a classified road; or

- a road of such other description as the Department (i.e. DRD) may by regulations prescribe.

In practice, however, it is likely that the majority of roads that will be considered for gating orders will be "alleyways" or "entries" to the rear of properties in urban areas.

2.2 Article 69A(1) of the 1993 Order requires district councils to have the approval of DRD to make a gating order. However, as a road can only be the subject of a gating order if it is a public road, district councils will need to consult DRD at the outset to confirm that the road in question is "adopted", i.e. part of the public road network maintained by Roads Service.

Access for occupiers

2.3 Article 69B of the 1993 Order prevents the making of an order if this will result in certain restrictions on access. Article 69B(3) of the 1993 Order states that a gating order may not be made that restricts the public right of way for the occupiers of premises adjoining or adjacent to the road in question. Therefore, any such occupier whose access would be restricted by the gating order must be given the ability to open the gates, for example, through the provision of keys.

Principal means of access

2.4 Article 69B(4) states that a gating order may not be made so as to restrict the only or principal means of access to any dwelling, i.e. gating orders cannot be used to prevent people (for example, postal services) from getting to residents' front doors. Similarly, under Article 69B(5), a gating order cannot be made that restricts the only or principal means of access to a business or premises used for recreation, during the periods when such premises are in use.

STEP 3: THE PROMOTER AND INFORMALLY CONSULTING THE PUBLIC AND ORGANISATIONS

3.1 Prior to a district council publishing a proposal to make a gating order, informal consultation will have been carried out by the Promoter. This will have included consultation with

the local community including residents and businesses and also with relevant organisations such as energy suppliers and statutory undertakers who may need to access the road regularly.

3.2 In general, it is advisable for the council to know about any opposition that may occur before a proposed order is published. In most cases the Promoter will liaise closely with the district council from the outset and therefore the councils will be aware at an early stage whether there is any opposition to a gating order being made and will be able to work with the Promoter, if appropriate, to mitigate that opposition. If there are fundamental issues pertaining to the installation of the gates that cannot be resolved, it is useful for the council to be able to terminate the process before spending resources on advertising and a potentially costly local inquiry.

STEP 4: IS THE ORDER EXPEDIENT FOR RESIDENTS AND THE COMMUNITY AS A WHOLE?

4.1 Article 69A(3)(c) of the 1993 Order states that an order can be made if it is "in all the circumstances expedient to make the order for the purposes of reducing crime or ASB". However, councils need to balance the crime/ASB reduction benefits of an order against any inconvenience that the gating order causes to residents and the community as a whole. Article 69A(4) states that these "circumstances" include:

- the likely effect of making the order on the occupiers of premises adjoining or adjacent to the road;
- the likely effect of making the order on other persons in the locality; and
- in a case where the road constitutes a through route, the availability of a reasonably convenient alternative route.

4.2 Given the points above, district councils will need to embark on a formal consultation with the community. However, an initial assessment should be based on evidence provided by those who use the road and brought to the council by the

Promoter. In practice, it is highly likely that it will be the residents in the immediate area who have brought the road to the attention of the council through a residents' association/community group. As the primary victims, it is improbable that they will object to anything that addresses crime and ASB, particularly as the principal means of access to their dwellings cannot be gated.

4.3 However, members of the wider community who are less affected by the crime and ASB that the road stimulates, but who use it as a through route, may object to its gating. It is for district councils to judge whether alternative routes are suitably convenient. If the gating of a road means that people now have their journey increased by a very significant amount, or have to use roads suitable only for vehicles, a gating order may not be appropriate.

4.4 Nevertheless, if the majority of residents in the immediate area wish to see the road gated because of the crime and ASB that is present, this should carry more significance than the views of others who may just wish to walk down the road. Even if there is more opposition to the order than support for it, a district council may still continue with a gating order if it feels that the problems experienced by the affected residents are overwhelming, and that other interventions to stop the problem will not be expedient.

Equality Issues

4.5 Councils must be satisfied that all issues relating to equality have been considered and addressed and that an equality screening exercise and, if necessary, a full Equality Impact Assessment (EQIA) has been carried out on the proposal for a gating order. If the Promoter is a public body, they will have been required to undertake the screening and any EQIA necessary. If the Promoter is not a public body, responsibility falls to the council (see The Role of the Promoter – paragraphs 18 and 19).

STEP 5: PUBLICISING THE ORDER

5.1 Once the decision has been made to progress the order formally, there are statutory publicity requirements that need to be observed. Article 69D(1) of the 1993 Order specifies that district councils must publish a notice in the Belfast Gazette and once at least in each of 2 successive weeks in one or more local papers:

- stating the general effect of the proposed order;
- specifying a place in the area where a copy of the draft order and any relevant map or plan may be inspected free of charge at all reasonable hours during a period of not less than 30 days from the date of the last publication of the notice; and
- stating that any person may by notice to the council make an objection to the proposed order within the period specified in the council's notice.

5.2 Article 69D(2) of the 1993 Order specifies that the council shall also serve a copy of the notice together with a copy of a draft of the order and of any relevant map or plan on:

- the occupiers of premises adjacent to or adjoining the road; and
- the owner of any cables, wires, mains, pipes or other apparatus placed along, across, over or under any road to which the order applies. (This would include statutory undertakers, gas or electricity services providers, water services providers and communications providers.)

5.3 Under Article 69D(3) of the 1993 Order, a copy of the notice should also be displayed in a prominent position on the road to which the order relates.

5.4 In addition to the legal requirements outlined above, it is recommended that the notice is posted on the council's website. It is in a council's interest to ensure that proposed gating orders are satisfactorily publicised before they are made and that the council has informed anyone it reasonably

considers might have an interest in the proposed order such as:

- anyone who requests a copy of the notice;
- anyone who has asked to be notified of any proposed gating orders;
- organisations who should be contacted under other rights of way legislation;
- any authority with an interest in the area through which the gated road will run including:
    - the PSNI;
    - the fire and rescue service board;
    - any health & social care trust.

5.5 The majority of roads considered for gating orders will be those in urban areas that suffer from ASB and crime. However, rural roads can also suffer from ASB and crime. It is therefore important to remember that gating orders can have implications for various groups of people, such as walkers who may oppose the termination of certain rights of way. Councils must ensure that any group who has a particular interest in the road in respect of which the order is being proposed is given an opportunity to comment.

5.6 It is important that people who use these roads understand why a gating order has been proposed. Therefore, it is recommended that district councils provide a justification and evidence for the order before it is made. Ideally, this evidence and justification should appear on the notice in the Belfast Gazette, local newspaper and on the council's website, with details of where members of the public can find more information if necessary.

STEP 6: ASSESSING REPRESENTATIONS FROM THE PUBLIC

6.1 A district council must consider any representations as to whether or not a proposed gating order should be made. When considering representations, it is essential that councils judge them against Article 69A(3) and (4) of the

1993 Order. It is the responsibility of the council to assess the representations and to make a decision on the basis of these as individuals will be able to use the judicial review process to determine whether a council has properly exercised its powers or has acted ultra vires.

6.2 Councils and promoters should not necessarily be deterred by objections; they should use the opportunity to incorporate compromises into the draft order, or to strengthen their justifications for the order being made. Opposition that is deemed trivial (other than from organisations that can trigger local inquiries – see Step 7B) can be overruled, and other objections can usually be overcome through discussion, compromise and practical measures (e.g. keys for power suppliers who may need to access the road).

6.3 Genuine concerns of crime and ASB should generally outweigh opposition from those non-residents, i.e. people not living directly adjacent to or adjoining the road, who are inconvenienced by loss of through access to the road:

- unless no suitable alternative routes exist within a reasonable distance;
- even if an order is opposed by a majority of residents, if the crime/ASB occurring is deemed authentic and substantial; and
- particularly if alternative measures have been tried and have proven unsuccessful or, for whatever reasons, there are no appropriate alternative measures available.

6.4 A full justification, with evidence, should be something that district councils have on file to provide to anyone who objects to the proposed order or anyone who requests an explanation for it. Responses to those who object should be comprehensive and should specifically address their concerns. The objective of the gating order is residents' protection from crime and/or ASB, so it is essential that councils aim to conclude this process promptly and without unnecessary delay.

6.5 Nevertheless, before proceeding with a gating order, a period of 30 days starting on the first date of the publication

note must have elapsed. If the publication note has specified a longer period, then this should be complied with before proceeding with an order. If representations are strongly polarised, and the decision to gate is unresolved, district councils may consider undertaking a local inquiry to decide. An inquiry will mean that the council can demonstrate they have acted in an impartial manner and all views have been accounted for. However, local inquiries can be costly and time-consuming, and councils are not obliged to hold them unless triggered by one of the agencies set out in Article 69D(2)(b) of the 1993 Order (see Step 7(B)). Therefore they should only be used when necessary. More details on the procedure for local inquiries is detailed in Step 8 of this guidance.

STEP 7: ASSESSING REPRESENTATIONS FROM ORGANISATIONS

A) Representations from public and private organisations

7.1 It is essential that district councils consider the representations (if any) of local organisations as well as those of the general public. Councils should seek, wherever possible, to avoid a situation where organisations are prevented from undertaking essential work – this can often easily be overcome by ensuring that the relevant organisations have keys that enable them to access the road. Issues will often not arise if the organisations have been notified before the public notice is released. This will mean that any reservations they have can be made clear and eased through discussion and compromise rather than arising during the consultation, when a formal response may be required.

7.2 However, if a formal representation is received from an organisation that opposes the order, it should be assessed carefully. In these circumstances, a council should consider the following questions:

- is this objection reasonable?

- can it be overcome through compromise, e.g. the possession of keys by vital personnel?
- is the organisation's objection against the order more important than the crime/ASB reasons that led to it being proposed?

7.3 If opposition is received from rights-of-way organisations, remember that the right of way will only be suspended rather than revoked under this legislation; these concerns should not supersede crime reduction priorities if reasonable alternative routes exist.

B) Representations which can trigger local inquiries

7.4 Article 69D(5) of the 1993 Order provides that a district council must hold a local inquiry if it receives an objection from the owner of any cables, wires, mains, pipes or other apparatus placed along, across, over or under any road to which the order applies, i.e.

- statutory undertakers;
- gas or electricity services providers;
- water services providers; and
- communications providers

7.5 If objections are received from other individuals, the district council can still conduct a local inquiry where it is appropriate to do so. In general, councils should seek to avoid a local inquiry, which will prove costly and time-consuming. It is important therefore, that the organisations listed in paragraph 7.4 are consulted before reaching this stage so that every effort can be made to deal with any objections.

7.6 District councils should ensure that the initial consultation phase is thoroughly completed before an inquiry is started.

STEP 8: HOLDING LOCAL INQUIRIES

8.1 Before proposing a gating order, it is highly recommended that district councils and the Promoter work in partnership with relevant agencies to ensure that the general consensus is positive. By taking these initial steps, it should be possible to make progress without the need for a potentially costly local inquiry. If objections are still received in writing, the council can avoid an inquiry if it makes the requisite changes to the proposal. Local inquiries should only be instigated as a last resort, when fundamental differences exist between authorities that discussion and negotiation have failed to alleviate.

8.2 A local inquiry must be held in accordance with Article 69D(7) of the 1993 Order which applies the provisions of Schedule A1 to the Interpretation Act (Northern Ireland) 1954 (the 1954 Act) (Provisions Applicable to Inquiries and Investigations)[4].

Appointing a person to hold the inquiry

8.3 It is the responsibility of the district council to appoint a person to hold the inquiry. The council should ensure that this person is suitably qualified and impartial. Impartiality is essential because the council must be able to defend its actions in court if the situation arises where the order is legally challenged. Any evidence of the council compromising the independence of the inquiry would invalidate the order's existence.

Notification of local inquiry

8.4 District councils should ensure that the holding of an inquiry is publicised as widely as possible. Under the provisions of Schedule A1 to the 1954 Act, councils must notify anyone appearing to them or the person holding the inquiry to be interested, of the time when and the place where, the inquiry is to be held. This would include anyone who has already made representations in relation to the proposed order. It is also good practice for the council to publish a notice in a

[4] http://www.legislation.gov.uk/apni/1954/33/schedule/A1

local newspaper and on the council's website. The components of the notice should include:

- the title and draft of the proposed order (including its general effect);
- the name of the council;
- the identity of the relevant road, with enough detail, either by description or specification, so that people understand which road is being referred to;
- a statement referring to the initial notice that proposed the gating order, notifying people that a local inquiry is to be held in connection with the proposal;
- the date, time and place of the inquiry and the name of the person who will hold the inquiry;
- information as to where further information can be found on the proposals for the relevant gating order including opening and closing times of the relevant premises; and
- the address to which any representations for consideration by the person holding the inquiry should be sent and the date and time by which they should be received.

Form and outcome of local inquiry

8.5 The procedure at the inquiry will be determined by the person appointed by the council to hold it but should allow any person to make representations or appear at the inquiry if they wish. The person holding the inquiry is empowered under Schedule A1 to the 1954 Act to require any person by notice to attend the inquiry to give evidence or to furnish any relevant information. When assessing the case for a gating order, the person holding the inquiry will carefully consider the balance of priorities between public rights of way and crime and ASB. After the inquiry has been concluded to their satisfaction, they will provide a report and recommendations to the district council. It will then be for the council to decide whether or not to proceed with making the proposed gating order with or without modifications. If the council chooses not to comply with the outcome of the local inquiry, it may be challenged through Judicial Review in the High Court and a

council's decision to ignore the inquiry's recommendation will be scrutinised. Consequently, this should only occur in the most exceptional of circumstances, and councils must ensure that they have a comprehensive (and legal) justification for their choice of actions.

8.6 A gating order should not be made until the local inquiry has been concluded and a decision has been made.

STEP 9: FORM AND CONTENT OF A GATING ORDER

9.1 Once all the previous steps have been completed and the decision to make the order has been granted, gating orders are quite simple, straightforward documents. Firstly, the order should include a statement asserting that the district council has met the conditions set out in Article 69A(3) of the 1993 Order. In effect, this means that the council must state that it is satisfied that ASB and/or crime exists in the area around the gating order, that the existence of such behaviour is exacerbated by the road and that a gating order would be beneficial for tackling crime and ASB in the area. Large amounts of detail are not required and so this initial statement should be kept fairly brief.

9.2 In addition to the initial statement, the order should include:

- the dates and times that the public right of way will be restricted;
- the location where the gating order will be situated;
- details of any persons who are excluded from this restriction; and
- the name and contact details of the person who is responsible for maintaining any gate authorised by the order.

STEP 10: PUBLICATION AND AVAILABILITY OF GATING ORDERS

10.1 Article 69E of the 1993 Order requires a district council to arrange for the publication of gating orders made by it. Councils are also required to make copies of orders available to anyone who requests them (a reasonable charge may be made by the council for this service).

10.2 After an order has been made, it is important that people continue to be aware of its existence. Prior to its making, a notice relating to the proposed order will have been in place at a prominent position on the road to which the order relates, inviting representations as to whether or not the order should be made. Once the order has been made, it is recommended that the notice be replaced by a copy of the gating order, in such a manner that it is visible to the public. This should remain in place for as long as the order is in force and the public's right to use the road is suspended.

STEP 11: PROVISION OF MAPS

11.1 It is important that maps showing the locations of gates are updated quickly and that they are issued to the relevant groups who will need them. **In particular it is vital that the emergency services have access to accurate maps. Failure to provide up to date information on the limited passage of gated roads may impact on the speed at which emergency services can provide their service.**

STEP 12: REVIEWING GATING ORDERS

12.1 It is important to ensure that all gating orders are working as intended by undertaking evaluations of the gating sites to see whether local circumstances have changed. Therefore, it is recommended that councils review each of their orders on an annual basis. This review should evaluate whether the gating order is acting as a useful crime or ASB reduction measure. It should also assess the impact it is having on the community and discussions should be held with local

residents to gauge whether the limited access is causing excessive inconvenience.

STEP 13: VARYING AND REVOKING GATING ORDERS

13.1 Following a review of a gating order, situations may arise that require the original terms of the gating order to be changed. This may be because the initial order was unsuccessful in stopping the problems, for example, the gates remained open during part of the day and the problems continued. Alternatively, the problems may have been stopped by the order, and the local community may wish to reinstate some access to the road, for example, by opening the gates during the day. Article 69C of the 1993 Order empowers district councils to vary or revoke an existing gating order.

13.2 Any variation will need to comply with the key principles of reducing crime and ASB while not excessively inconveniencing users of the gated road. Consequently, to revoke or vary an order, councils must follow the same procedure required for making the initial order, i.e. advertising the order in a paper, notifying relevant agencies and individuals, considering representations, and prompting a local inquiry when certain bodies object. The information contained in this guidance may therefore also be helpful for councils who are varying or revoking a gating order.

13.3 It should be noted that councils require the approval of DRD to vary a gating order so as to further restrict any public right of way over the road to which the order relates. They do not require DRD approval to vary a gating order so as to reduce the restriction imposed by it or to revoke a gating order.

Roads (Northern Ireland) Order 1993 (N.I. 15)

PART 6A
RESTRICTION OF RIGHTS OVER ROAD

Gating orders

69A—(1) A district council may, with the approval of the Department, make an order under this Article in relation to any relevant road which is situated within its district.

(2) An order under this Article is to be known as a "gating order".

(3) Before making a gating order in relation to a relevant road the district council must be satisfied that—

(a)premises adjoining or adjacent to the road are affected by crime or anti-social behaviour;

(b)the existence of the road is facilitating the persistent commission of criminal offences or anti-social behaviour; and

(c)it is in all the circumstances expedient to make the order for the purposes of reducing crime or anti-social behaviour.

(4) The circumstances referred to in paragraph (3)(c) include—

(a)the likely effect of making the order on the occupiers of premises adjoining or adjacent to the road;

(b)the likely effect of making the order on other persons in the locality; and

(c)in a case where the road constitutes a through route, the availability of a reasonably convenient alternative route.

(5) In this Article "relevant road" means a road other than—

(a)a special road;

(b)a trunk road;

(c)a classified road;

(d)a road of such other description as the Department may by regulations prescribe.

(6) For the purposes of this Part "anti-social behaviour" means behaviour by a person which causes or is likely to cause harassment, alarm or distress to one or more other persons not of the same household as that person.

Effect of gating orders

69B—(1) A gating order restricts, to the extent specified in the order, the public right of way over the road to which it relates.

(2) A gating order may in particular—

(a)restrict the public right of way at all times, or in respect of such times, days or periods as may be specified in the order;

(b)exclude persons of a description specified in the order from the effect of the restriction.

(3) A gating order may not be made so as to restrict the public right of way over a road for the occupiers of premises adjoining or adjacent to the road.

(4) A gating order may not be made so as to restrict the public right of way over a road which is the only or principal means of access to any dwelling.

(5) In relation to a road which is the only or principal means of access to any premises used for business or recreational purposes, a gating order may not be made so as to restrict the public right of way over the road during periods when those premises are normally used for those purposes.

(6) A gating order may authorise the installation, operation and maintenance of a barrier or barriers for the purpose of enforcing the restriction provided for in the order.

(7) A district council may install, operate and maintain any barrier authorised under paragraph (6).

(8) A road in relation to which a gating order is made shall not cease to be regarded as a road by reason of the restriction of the public right of way under the order (or by reason of any barrier authorised under this Article).

(9) In paragraph (4) "dwelling" means any building or part of a building occupied, or intended to be occupied, as a separate dwelling.

Variation and revocation of gating orders

69C—(1) A district council may, with the approval of the Department, by order vary a gating order made by the council so as further to restrict any public right of way over the road to which the order relates, if the council is satisfied that in all the circumstances it is expedient to do so for the purpose of reducing crime or anti-social behaviour.

(2) A district council may by order vary a gating order made by it so as to reduce the restriction imposed by the order, if and to the extent that it is satisfied that the restriction is no longer expedient in all the circumstances for the purpose of reducing crime or anti-social behaviour.

(3) A district council may by order revoke a gating order made by it, if it is satisfied that the restriction imposed by the order is no longer expedient in all the circumstances for the purpose of reducing crime or anti-social behaviour.

Procedure for orders under this Part

69D—(1) Before making, varying or revoking a gating order a district council shall publish in the Belfast Gazette and once at least in each of two successive weeks in one or more newspapers circulating in the area in which the road to which the order relates is situated a notice—

(a)stating the general effect of the proposed order;

(b)specifying a place in that area where a copy of a draft of the order and of any relevant map or plan may be inspected by any person free of charge at all reasonable hours during a period of not less than 30 days from the date of the last publication of the notice; and

(c)stating that, within that period, any person may, by notice to the council, inform it of the grounds upon which he objects to the making of the order.

(2) The district council shall, not later than the date on which the notice referred to in paragraph (1) is last published, serve a copy of the notice together with a copy of a draft of the order and of any relevant map or plan on—

(a)the occupiers of premises adjacent to or adjoining the road, and

(b)the owner of any cables, wires, mains, pipes or other apparatus placed along, across, over or under any road to which the order applies.

(3) In the case of an order under Article 69A(1) or 69C(1), the district council shall, not later than the date on which the notice referred to in

paragraph (1) is last published, cause a copy of that notice to be displayed in a prominent position on the road to which the order relates.

(4) Where, before the expiration of the period referred to in paragraph (1)(b), the district council proposes to modify the terms of the draft of an order, the council shall give and publish, in such manner as appears to it to be appropriate, such additional notices as the council considers appropriate for informing all persons likely to be adversely affected by the modification.

(5) If, before the expiration of the period referred to in paragraph (1)(b), the district council receives an objection from any person on whom a copy of the notice is required to be served under paragraph (2) or from any other person appearing to it to be affected, it shall, subject to paragraph (6), cause a local inquiry to be held unless the objection is withdrawn.

(6) Unless the objection is made by a person on whom a notice was served under paragraph (2)(b), the district council may dispense with an inquiry if it is satisfied that it is unnecessary to hold one.

(7) The provisions of Schedule A1 to the Interpretation Act (Northern Ireland) 1954 (c. 33) shall apply in relation to any local inquiry which a district council causes to be held under paragraph (5) as they apply to an inquiry held as mentioned in section 23 of that Act, but with the following modifications—

(a)in paragraph 1 for the reference to section 23 of that Act substitute a reference to paragraph (5) of this Article and omit the definition of "the Department";

(b)in paragraphs 2 to 7 for any reference to the Department substitute a reference to the district council causing the inquiry to be held; and

(c)in paragraph 7(1) omit the words ", with the approval of the Department of Finance and Personnel,".

(8) After considering—

(a)any objections to the proposed order which are not withdrawn; and

(b)where a local inquiry is held, the report of the person who held it,

the district council may make the order either without modifications or subject to such modifications as it thinks fit.

(9) If it appears to the district council that in any order under this Part the description of any road is in any respect incorrect or insufficiently clear, the council may by order make such modifications in the provisions of that order as may be necessary for correcting or clarifying that description.

(10) Paragraphs (1) to (8) do not apply to an order under paragraph (9), but the council shall publish notice of the making of that order in one or more than one newspaper circulating in the area to which the order relates.

Publication and availability of gating orders

69E—(1) A district council must arrange for—

(a)the publication of orders made by it under this Part; and

(b)copies of orders made by it under this Part to be made available to the public.

(2) Arrangements under paragraph (1)(b) may require the payment of a reasonable charge.".

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Active and Healthy Communities Directorate Business Plan for 2019/20
Reporting Officer (Including Job Title):	Michael Lipsett, Director of Active and Healthy Communities
Contact Officers (Including Job Title):	Janine Hillen, Assistant Director of Community Engagement Eoin Devlin, Assistant Director of Health and Wellbeing Paul Tamati, Assistant Director of Leisure and Sports

For decision	**X**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree the Active and Healthy Communities Directorate Business Plan for 2019/20 at Appendix 1.
1.2	**Background** The Directorate Business Plan provides an overview of planned activity for the year ahead, and contributes to the delivery of the Community Plan, Corporate Plan, Performance Improvement Plan and other key plans and strategies. It forms an essential part of the Council's Business Planning and Performance Management Framework, which demonstrates how corporate priorities area cascaded across the organisation and will provide assurance that they are delivered.
2.0	**Key issues**
2.1	In order to improve transparency and accountability, and facilitate a performance led approach to business planning, each Directorate has undertaken a review of the Business Plan for 2018/19. The review provided an overview of the performance of each Directorate over the past year and have been used to influence the development of the 2019/20 Business Plans. This exercise is an important part of the Council's statutory responsibility to strengthen the way performance is monitored, reviewed and reported across the organisation.
3.0	**Recommendations**
3.1	**That the Committee consider and agree:-** • **The Active and Healthy Communities Business Plans for 2019/20.**
4.0	**Resource implications**
4.1	There are no resource implications.
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good

	Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	This report has not been subject to a rural needs impact assessment.
7.0	**Appendices**
	Appendix 1: Active and Healthy Communities Directorate Business Plan for 2019/20.
8.0	**Background Documents**
	None

Active and Healthy Communities Directorate

Annual Business Plan 2019-20

Comhairle Ceantair an Iúir, Mhúrn agus an Dúin
Newry, Mourne and Down District Council

Contents

1.0 Introduction

1.1 The Active and Healthy Communities Directorate (AHC) is responsible for developing Leisure and Sporting Facilities, Health and Wellbeing Programmes and Community Engagement structures across the district. The Directorate has overall responsibility for the management of Safety and Good Relations and performs a lead role in promoting sustainability within the Council and across the district. It is also responsible for all the statutory functions in relation to the Environmental Health Service.

1.2 The core responsibilities of the Directorate are:

- **Leisure and Recreation**
- **Parks and Open Spaces**
- **Sports Development**
- **Environmental Health**
- **Sustainability**
- **Health Improvement**
- **Engagement and Community Development**
- **Strategic Programmes**
- **Community Services, Facilities and Events**

2.0 Background and Context

2.1 The AHC Business Plan is developed within the context of the Community Plan, Corporate Plan and Performance Improvement Plan. The Community Plan sets out the long-term outcomes for the District, based on the needs and aspirations of local people. The Corporate Plan sets out the key priorities for the Council between 2015-19, and how it will contribute to achieving the community planning outcomes. The Performance Improvement Plan highlights the improvements stakeholders can expect to see through the annual performance improvement objectives, which are clearly aligned to community planning outcomes and corporate priorities.

2.2 The Community Plan, Corporate Plan and Performance Improvement Plan are cross cutting and strategic in nature. They guide all activity within the organisation, as well as the subsequent allocation of resources, and sit within a hierarchy of plans, as outlined in the 'Business Planning and Performance Management Framework' (Figure 1).

2.3 The Business Planning and Performance Management Framework drives and provides assurance that the Council is delivering its corporate vision and priorities, whilst securing continuous improvement in the exercise of functions. It provides a mechanism to join up and cascade the various plans and strategies across the organisation, demonstrating how employees

contribute to achieving community planning outcomes and corporate priorities, for the ultimate benefit of the citizens we serve.

Figure 1: Business Planning and Performance Management Framework

2.4 Whilst the Corporate Plan focuses on issues which cut across the organisation and are strategic in nature, the AHC Business Plan provides an overview of the key operational activities for the coming year. These activities are explicitly linked to corporate priorities and coupled with 'business as usual' service delivery, provide clear direction for all employees within the Office (Figure 2). The AHC Business Plan is published annually and is the basis upon which performance is managed and reviewed by the full Council, Active and Healthy Communities Committee and Senior Management Team.

3.0 Purpose and Values

3.1 Purpose

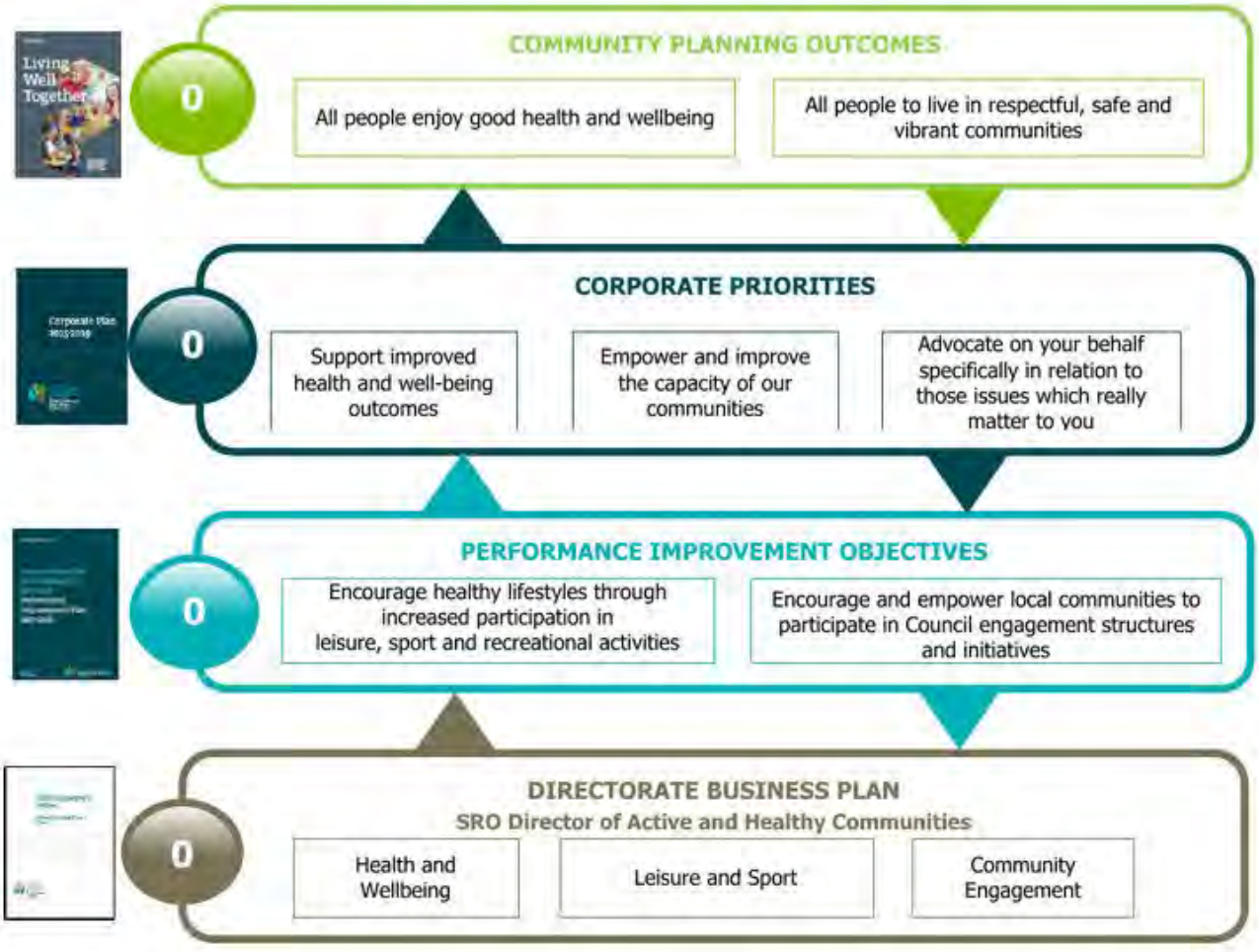
3.1.1 The primary purpose of the AHC Directorate is to develop, implement and monitor key strategic frameworks to support improved leisure, sport, health and wellbeing outcomes, improve environmental education across the district and build positive relations to develop communities that deliver improved outcomes within their local areas.

3.1.2 The bulk of departmental activity is aligned with three corporate objectives;

- Support improved health and well-being outcomes
- Empower and improve the capacity of our communities
- Advocate on your behalf specifically in relation to those issues which really matter to you

3.1.3 There are other important Council strategic objectives where the department makes a significant contribution. More detailed information is provided in Sections 5.0 (AHC Supporting Actions) and 6.0 (Performance) of this Plan.

Figure 2: AHC alignment across the Business Planning and Performance Management Framework



3.2 Values

3.2.1 The AHC Directorate adheres to the Council's values which are outlined in the Corporate Plan 2015-19:

We Will Be	What This Means
Citizen Focused	We will actively encourage citizen and community engagement, as well as be a listening and responsive Council.
Accountable	We will make decisions based on an objective assessment of need and operate in a transparent way as well as openly report on our performance.
Collaborative	We will actively encourage and pursue working in partnership and at all levels to deliver for our District.
Sustainable	We will take into account the social, economic and environmental impacts of our decisions on current and future generations.
Fairness	We will proactively target actions at those who are marginalised in our community.

3.2.2 In accordance with the Section 75 requirements of the Northern Ireland Act (1998), the CEO is committed to carrying out its functions having due regard to the need to promote equality of opportunity and regard for the desirability to promote good relations. All new and revised policies, procedures and programmes of work will be subject to an equality screening and rural needs impact assessment (where appropriate).

4.0 Challenges and Opportunities

4.1 The Active and Healthy Communities Directorate was established in December 2014. The Department continues to evolve in line with organisational change and remains committed to developing and embedding the necessary plans, policies and processes to deliver improvement across the organisation. Influences within the external and internal environment continuously present challenges and opportunities, which have an impact on the overall management and operation of the Active and Healthy Communities Directorate.

4.2 The various (internal and external) challenges and opportunities for the department are summarised as follows:

External Environment

- **Legislation:** Ensuring legislative compliance with The Local Government (NI) Act 2014 and subsequent Orders, specifically in relation to the Duty of Community Planning, Duty of Improvement and Political Governance, legislative changes as a result of potential EU Exit.

- **Strategic Alliances:** Collaborating with stakeholders to address the impact of Brexit and continue to operate amidst wider political uncertainty.
- **Community Planning**: Strengthening existing partnerships and progressing the implementation of the four Thematic Delivery Plans to support the achievement of the long-term community planning outcomes.
- **Local Government Reform:** Addressing legacy issues and successfully integrating the new powers and functions created by Local Government Reform.
- **Evidence Based Decision-Making**: Ongoing collation of national, regional and local datasets to inform and influence local decision-making, policy development and service provision.
- **Global trends**: Considering the impact of climate change, complex social issues, the needs of a growing and ageing population, growing health inequalities, increased demand for public services, fluctuations in crime and rates of anti-social behaviour and rising customer expectations on public service provision.

Internal Environment

- **Management:** Successfully establishing the new directorate in terms of its structure, governance and internal processes.
- **Resources:** Identifying and securing the financial and non-financial resources needed for the directorate to drive healthy and sustainable communities.
- **Structure**: Implementation of new departmental structure to ensure delivery of the corporate objectives and to meet the challenge of corporate restructuring and transfer of new or emerging services.
- **Legislation:** Ensuring corporate legislative compliance in respect of key statutory obligations, including Equality (Section 75), Performance Improvement as well as Community Planning which augments existing service delivery.
- **Community Planning:** Developing partnerships that will deliver local area-based plans to deliver on the Council's Community Plan.
- **Performance Management:** Continually monitoring and reviewing the department's performance, highlighting areas of high performance as well as identifying areas for intervention.
- **Transformation and Improvement:** Successfully developing and implementing a transformational programme of change that drives out the efficiencies and improvements that both members and the public demand.
- **Property and Land Assets:** Successfully developing and implementing the necessary frameworks, policies and processes to support the effective and efficient management of the department's estate.

5.0 Active and Healthy Communities Supporting Actions

Key Office Actions
Leisure and Sport – Promote increased levels of activity through the provision of services, infrastructure, and engagement and develop targeted programmes to improve health inequalities. **Health and Wellbeing** Protect and improve the Health and Wellbeing of our citizens and visitors and promote the principles of Sustainability both within the Council and in the wider District **Community Engagement** – Create a strong community base to empower and build capacity within our communities and ensure the views of our community are fully represented.

	Key Active and Healthy Community Actions	Timescale
Leisure and Sport	Undertake Recommendations of Play Strategy and deliver 8 key projects by March 2020.	Q2
	Undertake Recommendations of Sports Facilities Strategy and deliver 6 Key projects by March 2020.	Q2
	Undertake the development of an Open Space Strategy and Action Plan with a draft strategy in place for March 2020.	Q3
	Undertake the development of a Sports Strategy and action plan with a draft strategy in place for March 2020.	Q3
	Develop design proposals for a Newry City Park at the Albert Basin site for consideration.	Q2
	Review the indoor leisure business plan to promote alignment of operational practices and structures linked to service needs	Q4
	Implement measures to effectively manage Sickness absence	Ongoing
Health and Wellbeing	Carry out statutory functions in relation to Food Safety, Health and Safety at Work, Public Health and Housing, Environmental Protection and Consumer Protection	Q2
	Facilitate Biannual formal engagement between Council, the local Health Trusts and NIAS	Q2 & Q4
	Work to mitigate the day one Brexit implications for local business by providing Export Health Certificates for relevant businesses who will be exporting their produce to Third Countries.	Ongoing

	Working with the Office for Product Safety & Standards to ensure consumers continue to be protected through the regulation of consumer products at Ports.	
	Work in partnership with PHA, Community voluntary sector and the Local Health Trusts to address Health inequalities through agreed action plan.	Ongoing
	Develop a one stop shop to advise SMEs in relation to Food safety, Health and safety and Consumer Protection	Q1 & Q3
	Establish baseline of Customer satisfaction with Environmental Health Service	Q3
	Develop and deliver 'Cleaner Greener Communities Initiative' alongside the Neighbourhood Services Directorate to include a recognition event for participating groups.	Q3
	Continue to support and develop the Age Friendly Strategic Alliance with Statutory and Community Voluntary sector partners.	Q1, 2, 3 & 4
	Lead Partner for the Collaborative Action for the Natural Network (CANN) INTERREG VA project ensuring the delivery of all areas.	Ongoing
	Carry out the following measures in relation to Energy Efficiency 1.Develop a pilot Energy Efficiency advice service for residents 2. Increase Councils renewable energy generation through Solar, Photovoltaic and Heat Pump technologies with the aim of making Councils Buildings Nearly Zero Energy' where feasible 3. Investigate and implement battery storage on a trial site with Photovoltaic Panels with a view to roll out to other sites. 4. Continue energy efficiency drive in Council's estate and extend the use of the Energy Metering and Monitoring system across Council Facilities.	 Q3 Q2 Q3 Q1,2,3 & 4
	Deliver a funding programme for Biodiversity Improvement / Enhancement Projects across the District to assist and encourage local people and organisations to play a vital part in enhancing and maintaining the area's biodiversity. Assist a minimum of 10 local groups through this programme.	Q1
	Achieve accreditation for Newry, Mourne and Down District Council to become a member of the Sustainable Food Cities Network.	Q3

	Implement measures to effectively manage Sickness absence	Ongoing
Community Engagement	Implement recommendations arising from the Community Centres Effectiveness Review including the development of a Community Facility Strategy.	Q4
	Implement the recommendations arising from the Financial Assistance Audit, including the implementation of the Financial Assistance Policy and the Electronic Grant Management System.	Q3
	Further develop levels of engagement and participation through existing structures (eg DEAs. NHR, PCSP, PEACE IV)	Q4
	Harmonise service provision by developing new policies (and related procedures) to address identified gaps.	Q3
	Full implementation of statutory responsibilities in relation to Community Engagement service provision (including PCSP, Peace IV & DEAs)	Ongoing
	Develop and implement a District wide Good Relations Programme, PCSP Action Plan, NHR Action Plan (Downpatrick & Newry), PEACE IV Local Action Plan	Q2
	Develop and deliver 7 DEA Fora Action Plans and further develop their input into the implementation of the Community Plan	Q4
	Work with external organisations, and internally across departments to deliver a minimum of 2 Financial Assistance Calls per annum, and roll out external training sessions	Ongoing
	Positively engage minority groups through an outreach service provision (Downpatrick & Newry)	Ongoing
	Develop proposals for community facilities in line with Councils capital programme.	Ongoing
	Continue to logistically support local community run events and festivals	Q4
	Develop a New PCSP Action Plan	Q2
	Develop a DEA Action Plan	Q2

	Develop a Good Relations Action	Q2
	Implement measures to effectively manage Sickness absence	Ongoing

6.0 Performance

6.1 The following performance measures will be monitored during 2019-20:

Measures of Success
Leisure and Sport • 2.6% increase in attendances at indoor leisure facilities, including a 14% increase by 2019-20 • 5-6% year on year increase in the number of participants using Newry Leisure Centre • 9% increase in attendances at Downpatrick Leisure Centre, including a 72% increase by 2019-20 (when the new leisure centre completes) • Complete user satisfaction with indoor leisure facilities • Number of children and young people engaged in Community Play and other health and wellbeing initiatives • Number of participants from targeted groups involved in physical activity programmes
Community Engagement • Number of meetings, events and capacity building programmes, including attendance levels and participation evaluation • The effectiveness of Council run community engagement structures in facilitating stakeholder participation • Maintain the number of Neighbourhood Watch Schemes • Number of beneficiaries of the 'Good Morning, Good Neighbour' and 'Home Secure' schemes and the percentage who feel safer in their homes • Number and percentage of financial assistance projects funded and successfully delivered. • Approved Community Facility Strategy • Development of operational policies relating to individual service areas (3 per annum) • Develop and deliver 7 DEA Action Plans • Advertise and roll out a minimum of 2 FA Calls and 3 external training sessions for grant recipients • Maintain the number of visits to the Ethnic Minority Support Centre • Develop proposals and implement capital works programme (completion of 1 community facility per annum) • Support up to 200 community run events per annum.
Health and Wellbeing • 80% of service requests responded to within 3 days

- 80% of general planning applications processed within 15 working days of receipt (or 21 days)
- 80% of premises within the scope of the Food Hygiene Rating Scheme that have been scored and advised within statutory timescales
- Customer satisfaction with core Environmental Health Services (% of customers that were 'satisfied' or 'very satisfied'
- Percentage increase in number of groups assisted with litter picks/Environmental initiatives
- Percentage of target Home Safety visits completed
- Number of school environmental awareness talks completed
- Number of Groups receiving financial assistance from the Biodiversity call

AHC Plans, Strategies and Policies

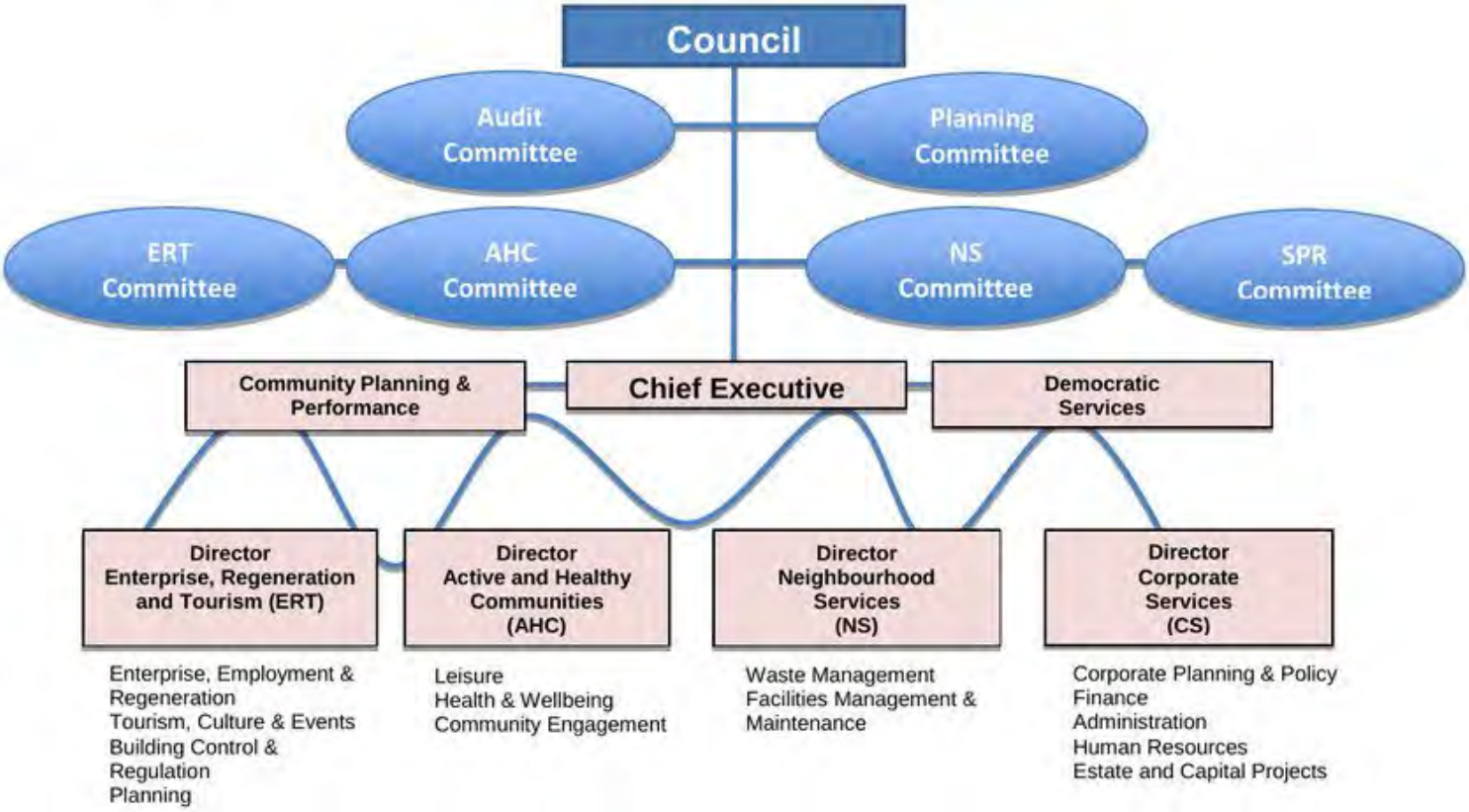
6.2 The AHC Directorate is responsible for leading the development, implementation and review of the following plans and strategies, which influence the work of both the Directorate and Council:

- Department Business
- Community Centre Effectiveness Review
- Local Biodiversity Action Plan
- Play Strategy and Actions Plan
- Sports Facilities Strategy and Action Plan
- MUGA Strategy and Action Plan
- Air Quality Management Action Plan
- PCSP Action Plan
- Food Service Plan
- 7 DEA Action Plans
- Wellbeing Strategy
- Indoor Leisure Business Plan
- Good Relations Action Plan
- Financial Assistance Policy
- PEACE IV Local Action Plan
- Play Inflatables Policy
- NHR Action Plan (Downpatrick & Newry)

7.0 Organisation and Directorate Structure

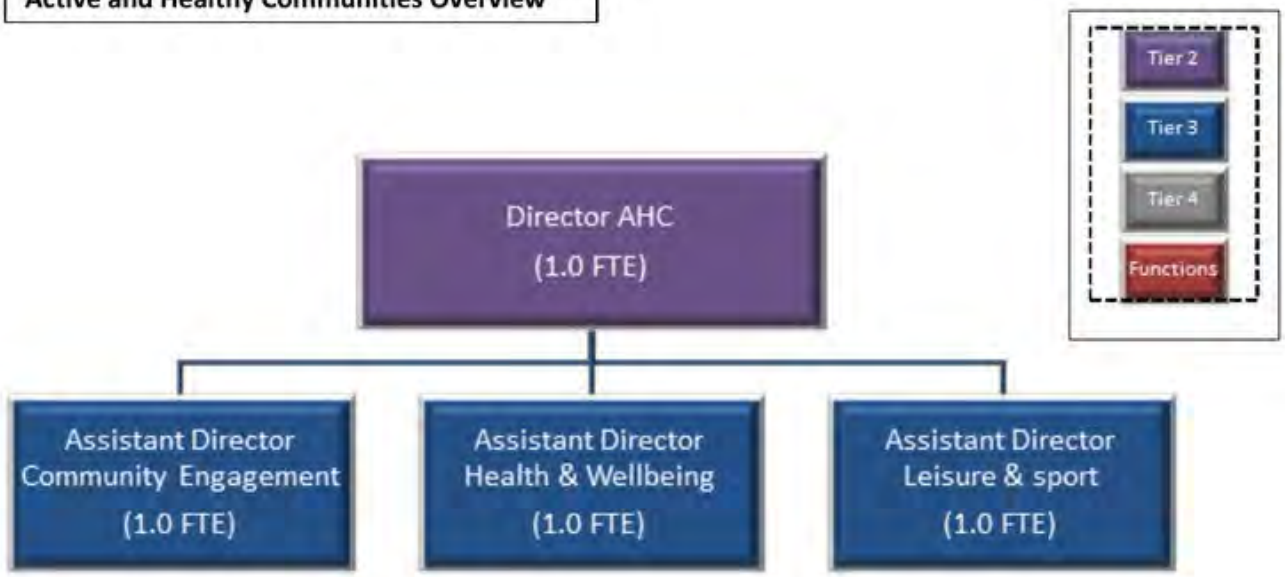
7.1 The Active and Healthy Communities Directorate is one of five Departments, which together comprise the management structure of the Council. The management structure of the Council is set out in Figure 1 and the Directorate it is set out in Figure 2.

Figure 1 - Council Management Structure

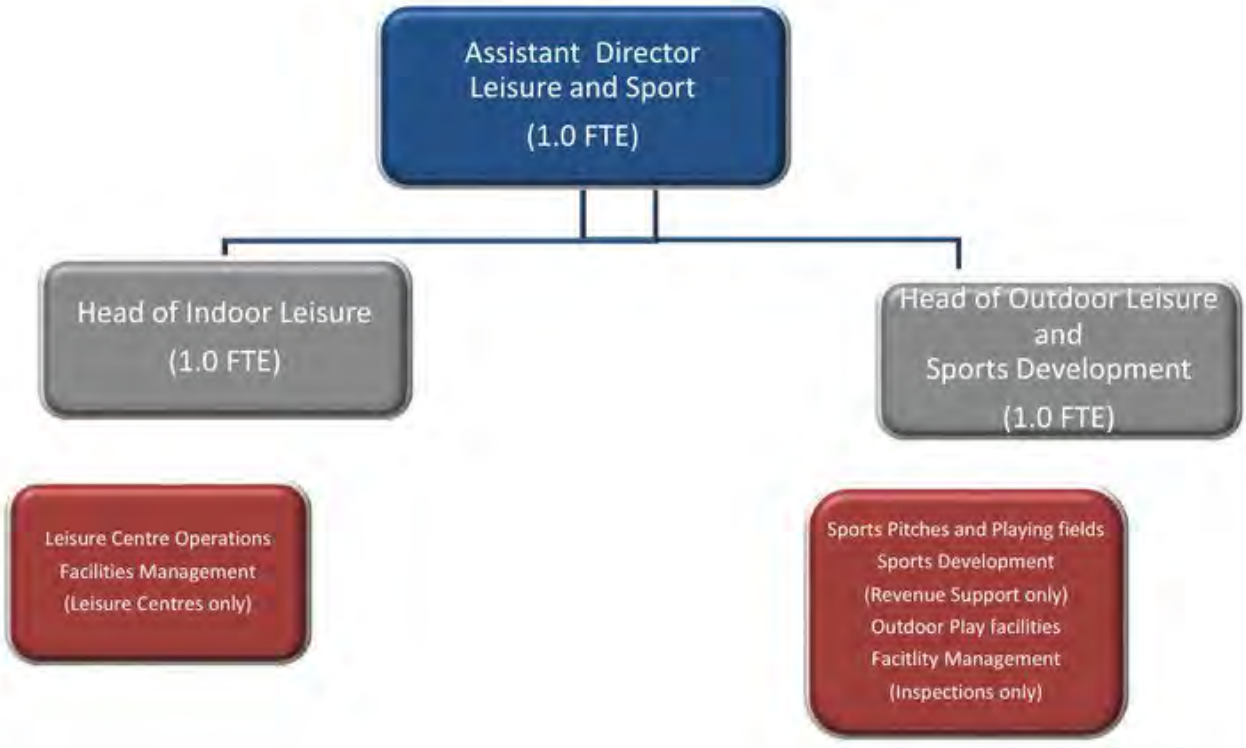


7.3 Figure 2 - Directorate Management Structure

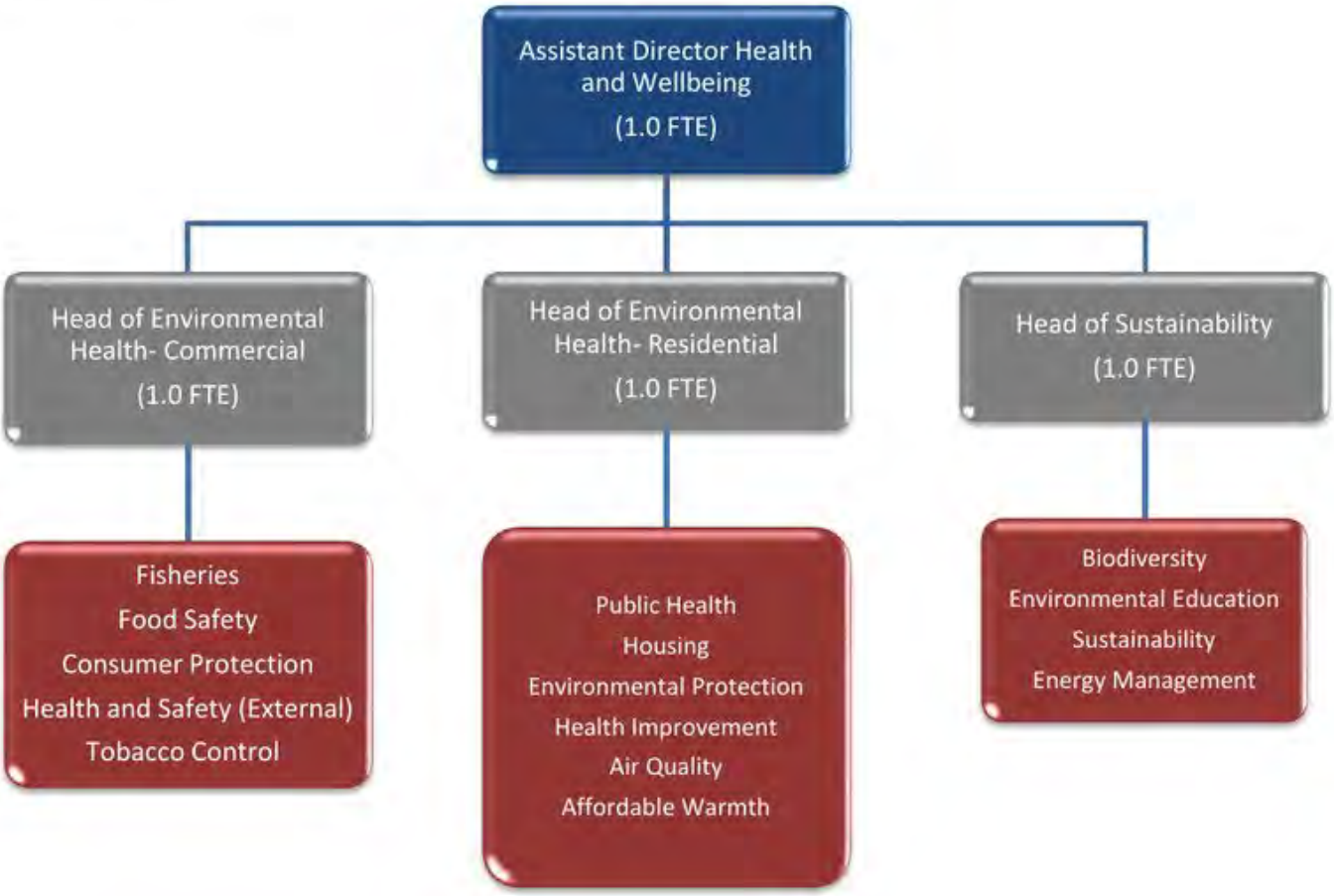
Active and Healthy Communities Overview



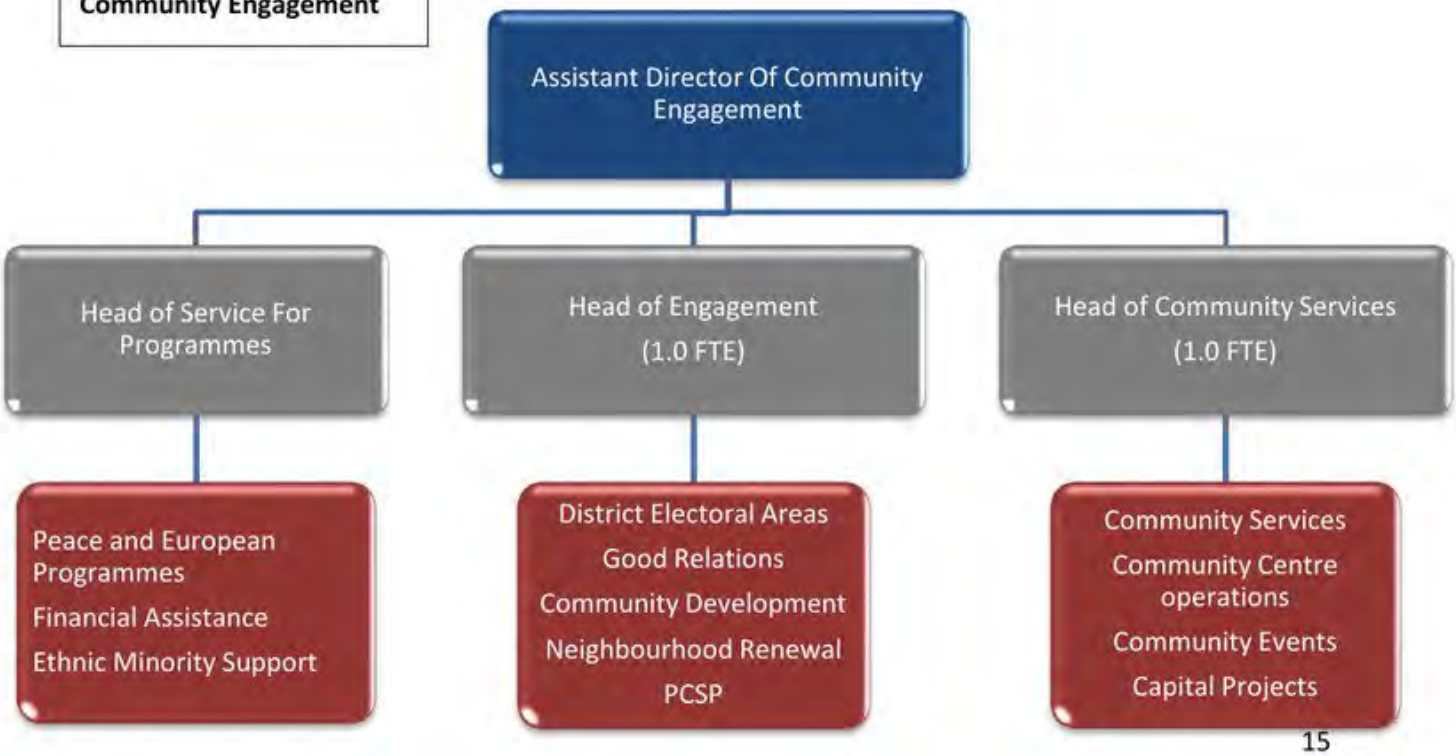
Leisure and Sport



Health & Wellbeing



Community Engagement



8.0 Financial Information

Net estimated expenditure (2019-20)			
Section	Gross Cost	Gross Income	Net Cost
Community Engagement	£5,237,642	£2,592,737	£2,095,145
Health and Wellbeing	£2,596,995	£597,103	£2,195,864
Sports and Leisure	7,156,349	£2,761,248	£6,655,709
TOTAL: Active and Healthy Community	£14,990,986	£5,951,088	£10,946,718

9.0 Governance Arrangements

9.1 Reviewing performance and reporting progress to Elected Members and other key stakeholders facilitates transparency, accountability and improvement in everything the Council does. The political and organisational governance arrangements to develop, monitor and report the Council's progress in implementing the AHC Business Plan are outlined below, and are supplemented by regular reviews by the Director and his team. The governance arrangements the Council has put in place to deliver continuous improvement are also subject an annual audit and assessment by the Northern Ireland Audit Office.

Figure 3: Governance Arrangements

Full Council
- Ratification of AHC Business Plan
- Ratification of the annual and bi-annual reviews of AHC Business Plan

Strategy, Policy and Resources Committee / Audit Committee
- Scrutiny and challenge around the Duty of Improvement
- Provide assurance that performance management arrangements are robust and effective

Active and Healthy Communities
- Consideration, scrutiny and approval of AHC Business Plan
- Consideration, scrutiny and approval of the annual and bi-annual reviews of AHC Business Plan

Senior Management Team
- Development, consideration and approval of AHC Business Plan
- Development, consideration and approval of the annual and bi-annual reviews of AHC Business Plan

Ag freastal ar an Dún
agus Ard Mhacha Theas
Serving Down
and South Armagh

0300 013 2233 (Council)
0300 200 7830 (Planning)
council@nmandd.org
www.newrymournedown.org

Oifig an Iúir
Newry Office
O'Hagan House
Monaghan Row

Newry BT35 8DJ

Oifig Dhún Pádraig
Downpatrick Office
Downshire Civic Centre
Downshire Estate, Ardglass Road

Downpatrick BT30 6GQ

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	District Electoral Area (DEA) Forums Update Report
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director Community Engagement
Contact Officer (Including Job Title):	Damien Brannigan, Head of Engagement

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** • To note the report. • To consider and agree to approve the actions in the attached Action Sheets from the DEA Forum Private Meetings listed in 3.1 below.
1.2	**Background** Information in Appendix 4 is provided to update the Committee on the on-going work of the DEA Forums. DEA Coordinators continue to implement actions detailed in their respective local action plans.
2.0	**Key issues**
2.1	None.
3.0	**Recommendations**
3.1	That the Committee: - • Note the report. • Agree to approve the actions in the DEA Forum Private Meeting Action Sheets attached for: ➢ Newry DEA Forum Private Meeting held on Thursday 31 January 2019. ➢ Crotlieve DEA Forum Private Meeting held on Tuesday 12 March 2019. ➢ Mournes DEA Forum Private Meeting held on Tuesday 12 March 2019 ➢ Downpatrick DEA Forum Private Meeting held on 11 June 2019 to be forwarded at next AHC. However, permission is required before this to allow the Education Authority & the Downpatrick DEA to erect a mural designed by the young people of Ardglass onto the wall of the Pavilion in the Meadow Playing Fields or the Playpark, Quay Street
4.0	**Resource implications**
4.1	Support and assistance from partners to deliver actions in the DEA action plans.
5.0	**Equality and Good Relations implications**
5.1	No Equality of Opportunity or Good Relations adverse impact is anticipated. Should have a positive impact on Equality of Opportunity and Good Relations.
6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered.
7.0	**Appendices**
7.1	Appendix I: Action Sheet for Newry DEA Forum Private Meeting held on Thursday 31 January 2019. Appendix 2: Crotlieve DEA Forum Private Meeting held on Tuesday 12 March 2019. Appendix 3: Mournes DEA Forum Private Meeting held on Tuesday 12 March 2019. Appendix 4: Update on the work of DEAs.
8.0	**Background Documents**
8.1	None.

NT/MIN/1

ACTION SHEET- NEWRY DEA MEETING – 31 January 2019

Item	**SUBJECT**	**DECISION**	***FOR COMPLETION – including actions taken/date completed or progress to date if not yet completed***
2019/1	Cant Fathom It	Investigate option to provide lobbyist workshop for this group and others	Coordinator to progress
2019/2	Rodent Infestation	Request updates regarding agency interventions	Coordinator to progress
2019/3	Rapid bins	To liaise with PCSP to consider a temporary installation on a Council site	Coordinator to progress
2019/4	Reimaging project – PEACE IV	Request to consider North Street under this programme as a potential site	Coordinator to J McCabe
2019/5	Cycle lanes	Request update from Transport NI regarding the implantation on new cycle lanes in Newry City	Coordinator to contact Transport NI

ACTION SHEET- Crotlieve DEA Private Forum Meeting 12th March 2019

ITEM	SUBJECT	DECISION	FOR COMPLETION – including actions taken/date completed or progress to date if not yet completed.
DEA/C/08/2019	Minutes & Action sheet from Crotlieve DEA Forum meeting 15th January 2019	No objections to new parking bay at The Square Warrenpoint	DEA Coordinator will write to DFI with a "No objection" response to the new Parking Bay at The Square, Warrenpoint.
DEA/C/08/2019	Minutes & Action sheet from Crotlieve DEA Forum meeting 15th January 2019	.Find out how many volunteers are recruited for Warrenpoint Park Project	DEA Coordinator seek an update on volunteer situation for Warrenpoint Park.
DEA/C/10/2019	Crotlieve DEA Action Plan	Feedback will be sent to DEA Coordinator regarding Action Plan	Any member with issues or questions regarding this should contact DEA Coordinator.
DEA/C/11/2019	Emerging Themes Health & Wellbeing	Nighltine Pilot Scheme	DEA Coordinator will seek a breakdown of numbers and profile of users for the Nightline Service from Translink.

DEA/C/11/2019	Health & Wellbeing	Health events .	Deirdre Magill will forward documentation regarding various Health issues to all members of the Forum for distribution.
DEA/C/11/2019	Environmental & Spatial Development	Reply from DFI regarding Mary Street Warrenpoint.	DEA coordinator to respond to correspondence from member of the public regarding Mary Street Warrenpoint.

ACTION SHEET- Mournes District Electoral Area Meeting – 12 March 2019

ITEM	SUBJECT	DECISION	FOR COMPLETION – including actions taken/date completed or progress to date if not yet completed
DEA/19/2	Chairperson's Remarks		**Agreed**
DEA/19/3	Minutes and Action sheet from 8 January 2019	**On the proposal of Councillor Glyn Hanna seconded by Councillor Sean Doran it was agreed to record the minutes as a true and accurate record**.	**Noted**
DEA/19/4	Declaration of Interest	There were no declarations of interest associated with this meeting.	**Noted**
DEA/19/5	Consultation on Council's Corporate Plan - Community Places Consultants.	Colm Bradley Community Places presented on the Council's Draft Community Plan and thanked members for their input.	**Noted**
DEA/19/6	Pride of Place Nomination.	On the proposal of Councillor Brian Quinn seconded by Councillor Henry Reilly it was agreed to approach Mountains of Mourne Country Cottages regarding nominating them for a Pride of Place award.	Kathleen Magee to action

DEA/19/7	New Year's Eve Event	Aisling Rennick thanked Kilkeel Development Association for the New Year's Eve event which took place in Kilkeel, there was a great turnout and a lot of positive feedback received.	**Noted**
DEA/19/8	Coordinators report	Claire Loughran, Mournes DEA Coordinator (Temp) provided members with a verbal update of ongoing projects as well as projects going forward and those which would be arranged during the Purdah period from end of March to end of May. The members expressed their sincere gratitude to Claire for all her hard work during Kathleen Magee's absence and welcomed Kathleen back. .	Noted.
DEA/19/9	Draft Mournes Action Plan for 19/20	On the proposal of Councillor Glynn Hanna seconded by Councillor Quinn it was agreed to mark this item as noted.	**Noted**
DEA/19/10	Mournes Newsletter	Mournes Newsletter February 2019 edition. (Copy circulated.	Noted
DEA/19/11	Capital Projects	Claire Loughran provided an update report on the Kitty's Road Community Centre Project	Noted

DEA/19/20	Economic Development	Claire provided an update on the Annalong Environmental Improvement Scheme	Noted

Appendix 4

The following information is an update for the Committee on the ongoing work of the DEAs.

Level of Civic Participation:

> Crotlieve, Newry and Slieve Gullion DEAs hosted a Syrian Family Day in Warrenpoint Town Hall on 23 March 2019. Held to support Syrian refugee families, information from Council, the PSNI and the Southern Health and Social Care Trust was provided.

> Newry and Mourne Youth Council (supported by the Education Authority, Youth Service, and Newry, Mourne and Down District Council) hosted the 6th Annual Youth and Future Talent Awards on 28 March 2019. Young people aged from 0 to 24 were nominated across 7 categories; Good Relations, Community Safety, Young Carer, Creativity and Innovation, Inspirational Young People, Voice of Young People and Social Inclusion.

> Crotlieve DEA in partnership with the PEACE IV Programme organised an information evening on 9 May 2019 to recruit groups to a Capacity Building Programme. The evening was successful with a number of groups now participating in the cross-community training.

> Newry and Crotlieve DEA Forums took part in a shared learning Good Relations Historical Tour in Dublin with Dr Eamon Phoenix in March 2019. The project aimed to build relationships within and across the forums.

> Crotlieve DEA supported the Brian Boru Club Hike in April 2019. 104 cub scouts took part in the cross-community event in Kilbroney Park.

> Slieve Croob, Downpatrick and Rowallane DEAs organised an Elderly Connectivity Event to combat social and rural isolation and build connections between older people throughout the district. The event aimed to raise awareness of the peace process and how far Northern Ireland has moved on from the 'Troubles' and eliminating sectarianism.

Level of Educational Wellbeing:

> Newry and Crotlieve DEAs organised a Good Relations Programme with Ballyholland Forresters: St Ita's Branch and the Women of Altnaveigh. Dr Eamon Phoenix hosted shared history talks for the ladies and they all enjoyed an historical tour of relevant sites in Dublin.

> Crotlieve DEA supported Cultural Diversity Week in St Patrick's Primary School, Mayobridge, where P4 children explored different cultures through music and dance.

> Rowallane and Slieve Croob DEAs delivered a cultural awareness event with Cedar Integrated PS, Crossgar, and Holy Family PS, Teconnaught. African drumming and tribal masks were used as mediums for the children to learn and accept other cultures.

Level of Health Status:

> The Mournes, Crotlieve, Newry and Slieve Gullion DEAs worked in partnership with

Southern Area Men's Health Forum and the Council's Health Inequalities Officer to hold a Men's Health and Wellbeing Event in Kilkeel in March 2019. The event was a huge success.

> Newry DEA hosted a Youth Screening Event in Newry Omniplex in March 2019. Young people from Newry, The Mournes, Crotlieve and Slieve Gullion DEAs attended the event where Women's Aid spoke to young people about healthy relationships.

> Participants from across the Newry, Crotlieve, Mournes and Slieve Gullion DEAs took part in a Children & Young People's Strategic Partnership (CYCSP) "Our Journey Through Disability" Event that connected parents, carers, services and organisations in the Newry and Mourne area to improve outcomes for children and young people with a disability and/or additional needs.

> The closing event in the 'Spanner in The Works' workshops and play project took place on 1 March 2019. Organised by Rowallane DEA in partnership with Downpatrick and Slieve Croob DEAs, the project sought to promote young people's physical/ mental health and provide them with a 'safe' space to talk about issues such as drugs, alcohol, dangers of social media etc. Mentored by Patricia Downey, 3 youth clubs from the 3 DEA areas held 6 workshops from January to March 2019 to write their play with a final performance on the closing night.

> Rowallane, Slieve Croob and Downpatrick DEAs met recently at Downpatrick's Men's Shed. This visit gave Shedders from Clonvaraghan (Castlewellan), Ballynahinch, Saintfield and Downpatrick the opportunity to share experiences and learn from each other. The visit encouraged cross community contact and helped to eliminate social/rural isolation.

> Slieve Croob DEA in partnership with County Down Rural Community Network (CDRCN) and Loughinisland GAC Healthy Clubs Working Committee delivered a Health, Well-Being and Safety Event on Thursday 23 May. The day commenced with the Action Cancer Bus accompanied there after by a range of information stands from the community, voluntary and statutory sectors.

> In association with the local branch of the Alzheimer's Society and to recognise Dementia Action Week (20-26 May 2019) Downpatrick, Rowallane and Slieve Croob DEAs organised an Alzheimers event called the Caring and Connecting Event for individuals living with dementia and family carers.

Level of Personal Safety and Crime:

> Downpatrick and Slieve Croob DEAs organised a Road Safety Young Drivers Event in partnership with the local PSNI, NIFRS, St Malachy's High School, Castlewellan, and St Patrick's Grammar School, Downpatrick, to raise awareness of the dangers of driving to young people who are learning to drive or recently passed their test. Participants had the opportunity to drive and be assessed during the event. Valuable advice on how to keep themselves and passengers safe was also available.

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	**Financial Assistance: Service Level Agreements (SLAs)**
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director: Community Engagement
Contact Officer (Including Job Title):	Justyna McCabe, Head of Programmes

For decision	v	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to recommendations in 3.1.
1.2	**Background** Newry Mourne and Down District Council provide funding to Community Centre/Organisation to support running costs. This year a Service Level Agreement Call was included in the Financial Assistance process. Several legacy SLA projects either did not apply or were not successful.
2.0	**Key issues**
2.1	Council agreed that any group/organisation that failed to apply or was not successful in applying to the Service Level Agreement open call for Financial Assistance, would be issued a Letter of Offer at 33% of the agreed legacy amount/budget for one year only. There were 8 SLA legacy groups that either failed to score threshold or did not apply and Letters of Offer have been issued offering 33% of costs. Four of the groups have raised concerns mainly around not being able to function with only 33% of costs for 1 year. Some of the groups further claimed they were unaware of the need to apply through a competitive process. To address these issues, Council could consider: • An increase to 50% of legacy payments for a 2-year period. Resulting in the following budget implications: - Year 1: an increase from the agreed £6,483 (33%) to £9,725 (50%) - Year 2: £9,725 - 50% of legacy award for 8 groups.

3.0	**Recommendations**
3.1	***That the Committee agree to:*** • To allocate legacy SLA groups 50% of legacy payments for 2019-2020 and 2020-2021. • To allow all groups, including new groups to reapply to Financial Assistance interim SLA open call (April 2021 – March 2023)
4.0	**Resource implications**
4.1	An increase of £12,967 for two years. Interim call revenue for successful applicants (2year period)
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered.
7.0	**Appendices**
	None
8.0	**Background Documents**
	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 August 2019
Subject:	**Peace IV Local Action Plan**
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director: Community Engagement
Contact Officer (Including Job Title):	Justyna McCabe, Head of Programmes

For decision	v	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to the recommendations arising from Peace IV Partnership (Appendix 1).
1.2	**Background** The Peace IV Partnership met on 19 March 2019.
2.0	**Key issues**
2.1	Recommendations arising from the meeting require AHC Committee approval.
3.0	**Recommendations**
3.1	**That the Committee agree to:** • **Approval to request SEUPB to extend Letter of Offer until June 2021.** • **Approval to process 190k and the remaining Animation Fund budget through the approved Council Financial Assistance process (subject to SEUPB's approval).**
4.0	**Resource implications**
4.1	No cost to Council. Project 85% funded by the EU and 15% by the two Governments.
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered.

7.0	**Appendices**
7.1	Appendix 1: Minutes of PEACE IV Partnership (February 2019).
8.0	**Background Documents**
8.1	None

Peace IV Partnership Meeting
Council Chambers, Monaghan Row, Newry.
Thursday 28th February 2019

Present:
Cllr Charlie Casey (Newry, Mourne and Down District Council)
Cllr David Hyland (Newry, Mourne and Down District Council)
Cllr Michael Ruane (Newry, Mourne and Down District Council)
Declan Murphy
Judith Poucher (Social Partner)
Martin McMullan (Social Partner)
Seamus Camplisson (Social Partner)

Officers Present:
Martina Flynn (PCSP Manager)
Justyna McCabe (Programmes Manager)
Tanya Jackson (Peace Officer)

Apologies noted from:
Breige Jennings (Social Partner)
Helen Honeyman (Harmony Community Trust)
Des O'Sullivan (PSNI)
Janine Hillen (Assistant Director)
Michael Lipsett
Ruth Allen (SHSCT)
Paul Yam (Social Partner)

In attendance:
Kytrina Mullan
Mura Quigley (County Down Rural Community Network)
Nicholas McCrickard (County Down Rural Community Network)

1. **Welcome**

Declan Murphy chaired the PEACE IV Partnership meeting.
The chair welcomed members of the PEACE IV Partnership, including Martina Flynn (PCSP manager), Mura Quigley and Nicholas McCrickard (County Down Rural Community Network). Apologies were noted by the chair.

2. **Conflict of Interest**

Seamus Camplisson, Martin McMullan and Judith Poucher declared a conflict of interest.

3. Presentation from County Down Rural Community network – Reimaging and Regeneration programme.

Mura Quigley and Nicholas McCrickard presented. The presentation was made available to all those in attendance.

10 Local Steering Groups have been established

A local steering Group has been established in Annalong. 15-20 people took part in the walk about.
Cllr Hyland queried if the Harbour would be involved in the project. Mura confirmed that the Harbour formed a large part of the conversation from the walk about but unfortunately there is insufficient funding and too short a timescale to include it in this project. The coastal path was also discussed.

A local steering group has been established in Ballykinler. The steering group would like to develop a community garden/allotment.
The 1st phase will involve 8 plots initially been released. The local primary school have expressed an interest.
Nicholas McCrickard explained that from previous experiences allotment projects take time to establish but once established and well run they can become very successful. Seamus Camplisson emphasised that there is a social value to allotments.

A local steering group has been established in Kilkeel. Through dialogue sessions the steering group has identified an area based in Kilkeel Lower square which could be an area to develop Artwork.

The presentation detailed the key challenges and successes in the project to date.

4. Minutes from Previous Meeting (Thursday,31st January 2019)

Seamus Camplisson requested that Harmony & Community Trust (pg1) be changed to Harmony Community Trust.
The minutes were approved:
Proposed: Cllr David Hyland
Seconded: Cllr Michael Ruane

5. Management Report

Justyna McCabe presented the management report update.

Peace Officer – Staff recruitment and retention issues ongoing. We are currently recruiting a new Peace Officer.

Justyna Highlighted to the Partnership the correspondence from SEUPB in relation to Brexit.

The programmes Unit will distribute mileage forms to all members.

Justyna requested that all members submit Conflict of Interest forms if required.

6. Partner Delivery Agent Reports

Partner Delivery Agent reports were circulated to the PEACE Partnership Members.

Children and Young People
Tanya Jackson presented the Children and Young People report. No Delegated Authority requested.

Shared Spaces and Services
Justyna McCabe presented the Shared Spaces and Services report. No Delegated Authority requested.

I.3, I.7, I.8 Ex-military sites legacy programme. Justyna highlighted that the PEACE Programme has requested to re-allocate 100k from the Ballynahinch project to Saintfield 3G pitch and BMX track as the revised costings for these projects exceeded the original budget. We are currently awaiting SEUPB approval.

I.11 Saintfield Community Centre – Justyna McCabe confirmed contractors are on site for this project.

Building Positive Relations.
Tanya Jackson presented the Building Positive Relations report. No Delegated Authority requested.

T.7 Shared History & Culture Programme

- Community archaeological project – Tanya invited any interested members to attend a follow up lecture, based on the ongoing post – excavation programme on the 7th March 2019.
- The Bigger Picture – Tanya addressed the Partnership and asked if they know anyone who might like to take part in this programme to contact the Peace office.

PCSP

Martina Flynn presented the PCSP Report. No Delegated Authority requested.

7. Date of Next Meeting:

Date: Tuesday 19th March 2019
Time: 5pm
Location: Council chambers, Downpatrick

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17th June 2019
Subject:	Report on logistical support for events
Reporting Officer (Including Job Title):	Janine Hillen Assistant director of Community Engagement
Contact Officer (Including Job Title):	Julie Mc Cann Head of Community Services, Facilities and Events.

For decision	**x**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to a cap to the number of barriers that will be delivered by Council to any one group to 50.
1.2	**Background** In line with the Supporting Community Events Policy & Procedures (Aug18) (Appendix 1 & 2), Council provides logistical support to constituted community/ voluntary organisations who manage community run events throughout the District. The purpose of providing this logistical support is to: • Empower local communities • Encourage community organisations to play a greater role in the management of events • Promote equality of opportunity, good relations and assist in supporting groups identified under Section 75, Northern Ireland Act (1998). In the 2018/19 financial year, Council has provided logistical support to 279 groups. Logistical support currently covers the loaning of tables, chairs, marquees, gazebos, barriers and a dancing deck (subject to approval from Building Maintenance).
2.0	**Key issues**
2.1	At the AHC Committee in June 2016 Council agreed to extend the provision of logistical support to events throughout the entire District. Due to the limited space within Community Service vehicles it was further agreed that any request for over 50 barriers should be hired in. In 2017/18 five requests were received for events requiring over 50 barriers at a total cost of £1,350. In 2018/19, the requests for more than 50 barriers had tripled and Council has incurred supplementary costs of £9,921.60. There has been no additional provision within the events budget to accommodate this increase.

3.0	**Recommendations**
3.1	**That the Committee agree to cap to the number of barriers that will be delivered by Council to any one group to 50 – (maximum 2 journeys in Council van).**
4.0	**Resource implications**
4.1	Saving to council of approx. £9,000.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	A rural Needs Impact Assessment is not required at this time.
7.0	**Appendices**
	None
8.0	**Background Documents**
	Appendix 1: Supporting Community Events Policy Appendix 2: Supporting Community Events Procedures

Newry, Mourne and Down District Council
Supporting Community Events Policy
June 2016

1. Title

Newry, Mourne and Down District Council Supporting Community Events Policy.

2. Statement

The policy acknowledges that community events are an important aspect of community development and provides principles/guidelines to assist in the provision of effective engagement and capacity building at a local level.

Council approves this policy and any associated implementation as a commitment to assist communities in the delivery of events and activities, through the provision of advice, training, equipment and signposting to relevant support services.

3. Aim

The aim of this policy is to build on the Council's civic leadership role and give appropriate consideration and recognition to community engagement and capacity building within the Newry, Mourne and Down District Council area.

The Policy will be implemented in the public interest to:

- empower local communities
- encourage community organisations to play a greater role in the management of events
- promote equality of opportunity, good relations and assist in supporting groups identified under Section 75, Northern Ireland Act (1998).

4. Scope

4.1 The policy applies to events primarily organised by the community and voluntary sector.

4.2 The policy excludes events organised by any partner statutory or profit making organisations.

4.3 While this is a corporate policy, implementation of the policy will be primarily delivered by the Active and Healthy Communities Directorate.

4.4 The scope of the policy will extend to providing advice, training and equipment as listed within the Supporting Community Events Procedures.

Newry, Mourne and Down District Council
Supporting Community Events Policy
June 2016

5. Related Policies/Legislation

Northern Ireland Act (1998)
Sports and Community Facility Management and Leasing Policy
Newry, Mourne & Down District Council Charging Framework and Principles for the Hire of Facilities
Newry, Mourne & Down District Council Events Safety Policy

6. Definitions

'Community Events' means events organised and run by constituted community or voluntary organisations.

7. Policy Owner(s)

Director of Active and Healthy Communities.

8. Contact details in regard of this policy are:

Assistant Director of Community Engagement.

9. Policy Authorisation

Committee considered on June 2016

Council authorised on August 2016

10. Policy Effective Date 1st September 2016

11. Policy Review Date

The policy will be reviewed every four years.

12. Procedures

This policy should be read in conjunction with the Supporting Community Events Procedures.

Newry, Mourne and Down District Council
Supporting Community Events Policy
June 2016

13. Equality Impact Assessment

The policy has been equality screened and it is recommended it not be subject to an equality impact assessment.

14. Version Control

1.0

Newry, Mourne and Down District Council

SUPPORTING COMMUNITY EVENTS PROCEDURES

1.0 PURPOSE OF THE PROCEDURES

The purpose of these procedures is to ensure a consistent approach in supporting community and voluntary organisations in the management of community events and to help in the implementation of effective engagement and capacity building at a local level.

2.0 AIMS OF THE PROCEDURES

- Empower local communities
- Encourage community organisations to play a greater role in the management of events
- Promote equality of opportunity, good relations and assist in supporting groups identified under Section 75, Northern Ireland Act (1998).

3.0 SCOPE

The purpose of these procedures is to define the levels of support that can be provided to community & voluntary organisations in the management of local events, including:

- The type and levels of support which can be provided
- Conditions under which support will be provided
- Process for requesting support
- Cross-departmental support for events
- Exclusions

4.0 LEVELS OF SUPPORT

A. Signposting to local advice services
B. Capacity building with groups wishing to manage community events
C. Equipment (subject to availability – allocation will be on a first come, first served basis) including the provision of:
    - Barriers (up to a maximum of 170, per group/request)
    - Marquees (up to a maximum of 15, per group/request)
    - Tables (up to a maximum of 30, per group/request)
    - Chairs (up to 250, per group/request)
    - Dancing Deck (1 - subject to available staff resource & completed site assessment)

Where possible, Council will work with groups to determine what measures can be put in place to reduce the use of Council resource when supporting events. (E.g. self-collection and return of equipment/requests during core working hours)

5.0 CONDITIONS

Requests relate to community events taking place within the Newry, Mourne and Down District Council area. The provision of support can only be accepted subject to the following conditions being met;

- Community/Voluntary organisations must be able to produce a valid constitution or relevant governing documentation.
- Applications will only be accepted by organisations operating within the Newry, Mourne & Down District Council area.
- The request must relate to a community event organised by the community sector only, and excludes events organised by any partner statutory or profit making organisation.
- Completion of an Equipment Loan Request Form submitted a minimum of 4 weeks before the planned community event.
- Groups must acknowledge receipt of and agree to comply with (as appropriate) the Newry, Mourne & Down District Council –A Guide to Organising Safe Events.
- Groups cannot request equipment on behalf of another party. The loan agreement is exclusive between applicant and Council.

6.0 PROCESS FOR REQUESTING SUPPORT

Newry, Mourne & Down District Council remain committed to providing on-going advice and capacity building support for groups wishing to manage community events. Council Officers from Active & Healthy Communities can assist by signposting groups to the information required or provide details of the latest capacity building programmes running locally or grant aid.

Groups who require equipment for events must, in the first instance submit an Equipment Loan Request Form at least 4 weeks before the planned event.

Contact for support should initially be made through Active & Healthy Communities Department. Groups cannot reserve equipment prior to the submission of the Equipment Loan Request Form.

At least 24 hours' notice should be given to Council when equipment is no longer required due to cancellation of an event.

7.0 COSTS

Subject to availability, the provision of equipment for community events can be provided free of charge.

Council has the right to refuse the loan of equipment to a group/organisation who has returned damaged property or failed to return items in full.

8.0 CROSS DEPARTMENTAL SUPPORT FOR COMMUNITY EVENTS

The implementation of the Policy will be primarily delivered through Active and Healthy Communities Directorate; however there are other occasions during the execution of community events, when input is required from other Council Departments.

The following table highlights the processes in place that helps groups access additional support/services in order to effectively manage community events and provides a level of assurance for Council that all requirements have been met:

Service available	Process	Requirements
Financial Assistance	Application for funding through Council Strategic Programmes Section	Risk Assessment Insurance Permissions for land usage
Use of Council land for events	All requests processed through Administration Department with subsequent approvals through Corporate Management Team or via a member of Senior Management Team under the Council's Scheme of Delegation	Risk Assessment Insurance
Access to Council land for events	All requests processed through Department responsible for the specific site	Risk Assessment Insurance
Professional Input on ERT events	Developmental work with groups running events listed on Councils Tourism Schedule	Comprehensive Event Plan
Licensing	Application through Council Building Control	Risk Assessment Insurance Permissions for land usage

Environmental Cleansing (including litterpickers and bags)	Request through RTS Department	Risk Assessment Insurance Permissions for land usage
Health & Safety Advice	Request through Council H&S Manager	Comprehensive Event Plan
Warden Services	Request through PCSP	Risk Assessment Insurance Permissions for land usage
Dancing Deck	Request initially through AHC Authorisation provided by Building Maintenance (subject to staff availability)	Site Assessment Insurance Permission to use land

9.0 Exclusions

Whilst the Policy and Procedures provide a number of mechanisms by which community and voluntary organisations can access support for events, there are a number of areas/services that cannot be provided on behalf of events, specifically:

- Staff
- Undertaking risk assessments
- Insurance cover
- Procuring items for events (e.g. fireworks, bouncy castles etc)
- PA Systems
- Portaloos
- Skips

Report to:	Active and Healthy Communities
Date of Meeting:	16th June 2019
Subject:	Enforced Closure Compensation for Community Associations
Reporting Officer (Including Job Title):	Janine Hillen Assistant Director Community Engagement
Contact Officer (Including Job Title):	Julie Mc Cann Head of Community Services, Facilities and Events

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	At present, Newry, Mourne & Down District Council is either directly or indirectly supporting many community facilities across the District. From time to time NM&DDC enforces a closure on some facilities to assist as a polling station during elections or as an emergency rest centre.
2.0	**Key issues**
2.1	Several Community groups have advised that they are at a detriment for assisting Council with such activities as not only do they lose income from loss of bookings, but they are also incurring the utility costs. When used as a polling station, facility owners are entitled to claim expenses for use of utilities at a rate set by the Electoral Office. Council as the owner of many Centres also undertake a process to claim back associated costs. Unfortunately, when facilities are used as an emergency rest centre the Emergency Planning Co Ordinator for the Southern area has advised that there are no existing compensation protocols for the use of community centres in these circumstances. There are approximately thirty community centres registered for use as an emergency rest centre.
3.0	**Recommendations**
3.1	Committee to agree that fees paid by the Electoral Office to Council for use of community managed facilities at elections are passed on to the relevant Community Association.
3.2	Committee to approve payment of £150 per day for utilities or associated costs incurred when the facility is being used as an emergency rest centre by Council. This figure is in line with current rates given by the electoral office for use as polling stations.
4.0	**Resource implications**
4.1	Officer time to administer. Scheme can be delivered within existing resource.

5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified.
7.0	**Appendices**
7.1	None
8.0	**Background Documents**
8.1	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Financial Assistance: Service Level Agreements (SLAs)
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director: Community Engagement
Contact Officer (Including Job Title):	Justyna McCabe, Head of Programmes

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to recommendations contained in 3.1.
1.2	**Background** Call 2 for Financial Assistance opened on Monday 15 April 2019 and closed on Monday 13th May 2019 with 180 applications received under the following themes: • Christmas Illuminations • Good Relations • Minor Capital Grants • Minority Communities • PCSP • Community Capital • Sports Facilities Capital Attached are reports which provide a breakdown of the number of applications, pass and fail at each stage of the process, geographical spread of the applications received and a breakdown of the final allocations to successful applicants. It is proposed that Call 3 open in Autumn 2019 subject to the confirmation of budgets. Themes will be agreed with budget holders.
2.0	**Key issues**
2.1	The amount of funding requested was considerably higher than the available budget in: - Christmas Illuminations - Good Relations - Sports Capital It is recommended that we award 50% of amount requested to each successful applicant under Christmas Illuminations and 75% under Good Relations.

	Under Sports Capital applications that met the required thresholds were scored and ranked and funding available has been awarded to the highest-ranked projects. See appendices attached for full details of awards.
3.0	**Recommendations**
3.1	**That the Committee agree to:** • To fund applications in Call 2 as per the Appendices. • To open Financial Assistance Call 3 in Autumn 2019 (subject to the confirmation of budgets).
4.0	**Resource implications**
4.1	The total amount awarded for each theme as per the Appendices.
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered.
7.0	**Appendices**
	Call 2 Analysis
8.0	**Background Documents**
	None

Christmas Illuminations Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 40

28 Applications recommended for funding

70% of applications awarded

Amount requested from successful applicants **£71,535.00**

Total amount awarded **£35,917.50**

Of the 40 applications:

4 failed basic eligibility = 10%

8 Failed stage 2 scoring = 20%

Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 4 Fail

Group	Passed basic eligibility
CH-17-2019	No
CH-21-2019	No
CH-29-2019	No
CH-33-2019	No

Stage 2 = 8 fail

Group	Passed basic eligibility	Stage 2
CH-2-2019	Yes	No
CH-3-2019	Yes	No
CH-15-2019	Yes	No
CH-16-2019	Yes	No
CH-18-2019	Yes	No
CH-19-2019	Yes	No
CH-20-2019	Yes	No
CH-34-2019	Yes	No

Stage 1 & 2 = 28 Passed & 28 Recommended for Awarded

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
CH-1-2019	Yes	Yes	£1,100.00
CH-4-2019	Yes	Yes	£1,325.00
CH-5-2019	Yes	Yes	£2,500.00
CH-6-2019	Yes	Yes	£615.00
CH-7-2019	Yes	Yes	£1,000.00
CH-8-2019	Yes	Yes	£1,500.00
CH-9-2019	Yes	Yes	£1,500.00
CH-10-2019	Yes	Yes	£1,385.00
CH-11-2019	Yes	Yes	£1,465.00
CH-12-2019	Yes	Yes	£1,175.00
CH-13-2019	Yes	Yes	£1,500.00
CH-14-2019	Yes	Yes	£1,420.00
CH-22-2019	Yes	Yes	£1,000.00
CH-23-2019	Yes	Yes	£835.00
CH-24-2019	Yes	Yes	£1,500.00
CH-25-2019	Yes	Yes	£1,230.00
CH-26-2019	Yes	Yes	£1,200.00
CH-27-2019	Yes	Yes	£1,225.00

Appendix

CH-28-2019	Yes	Yes	£1,500.00
CH-30-2019	Yes	Yes	£1,500.00
CH-31-2019	Yes	Yes	£1,050.00
CH-32-2019	Yes	Yes	£917.50
CH-35-2019	Yes	Yes	£1,500.00
CH-36-2019	Yes	Yes	£975.00
CH-37-2019	Yes	Yes	£500.00
CH-38-2019	Yes	Yes	£1,500.00
CH-39-2019	Yes	Yes	£1,500.00
CH-40-2019	Yes	Yes	£1,500.00
Total Awarded			**£35,917.00**

END

Community Capital Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 5

2 Applications recommended for funding

40% of applications awarded

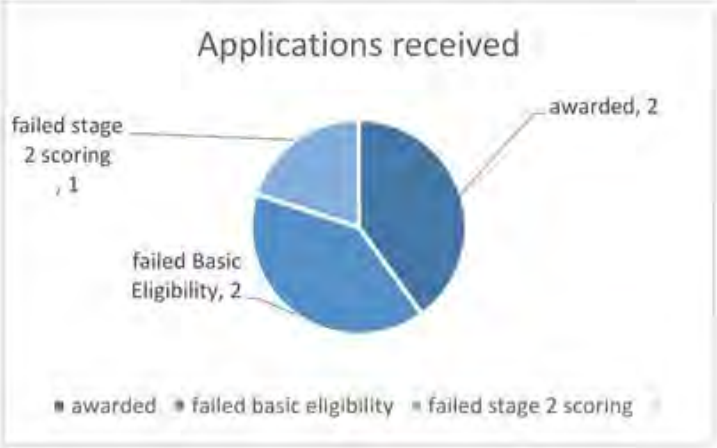
Amount requested from successful applicants **£66,800.00**

Total amount awarded **£66,800.00**

Of the 5 applications:

2 failed basic eligibility = 40%

1 Failed stage 2 scoring = 20%



Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 2 Fail

Group	Passed basic eligibility
CC-4-2019	No
CC-5-2019	No

Stage 2 = 1 fail

Group	Passed basic eligibility	Stage 2
CC-1-2019	Yes	No

Stage 1 & 2 = 2 Passed & 2 Recommended for Awarded

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
CC-2-2019	Yes	Yes	£40,800.00
CC-3-2019	Yes	Yes	£26,000.00
Total Awarded			**£66,800.00**

END

Good Relations Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 51

38 Applications recommended for funding

74% of applications awarded

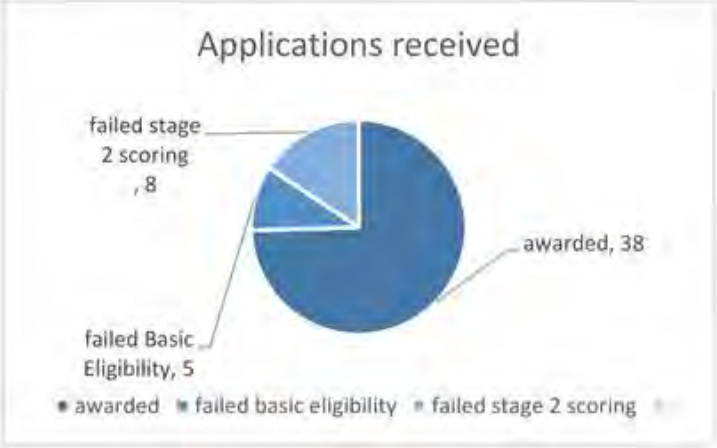
Amount requested from successful applicants **£37,025.00**

Total amount awarded **£27,722.00**

Of the 51 applications:

5 failed basic eligibility = 10%

8 Failed stage 2 scoring = 16%



Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 5 Fail

Group	Passed basic eligibility
GR-16-2019	No
GR-33-2019	No
GR-46-2019	No
GR-50-2019	No
GR-51-2019	No

Stage 2 = 8 fail

Group	Passed basic eligibility	Stage 2
GR-1-2019	Yes	No
GR-3-2019	Yes	No
GR-9-2019	Yes	No
GR-15-2019	Yes	No
GR-17-2019	Yes	No
GR-22-2019	Yes	No
GR-32-2019	Yes	No
GR-39-2019	Yes	No

Stage 1 & 2 = 38 Passed & 38 Recommended for Awarded

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
GR-2-2019	Yes	Yes	£750.00
GR-4-2019	Yes	Yes	£750.00
GR-5-2019	Yes	Yes	£750.00
GR-6-2019	Yes	Yes	£750.00
GR-7-2019	Yes	Yes	£743.00
GR-8-2019	Yes	Yes	£750.00
GR-10-2019	Yes	Yes	£750.00
GR-11-2019	Yes	Yes	£750.00
GR-12-2019	Yes	Yes	£750.00
GR-13-2019	Yes	Yes	£713.00
GR-14-2019	Yes	Yes	£750.00
GR-18-2019	Yes	Yes	£750.00
GR-19-2019	Yes	Yes	£500.00
GR-20-2019	Yes	Yes	£750.00
GR-21-2019	Yes	Yes	£750.00
GR-23-2019	Yes	Yes	£750.00
GR-24-2019	Yes	Yes	£750.00

Appendix

GR-25-2019	Yes	Yes	£750.00
GR-26-2019	Yes	Yes	£750.00
GR-27-2019	Yes	Yes	£750.00
GR-28-2019	Yes	Yes	£750.00
GR-29-2019	Yes	Yes	£750.00
GR-30-2019	Yes	Yes	£750.00
GR-31-2019	Yes	Yes	£563.00
GR-34-2019	Yes	Yes	£750.00
GR-35-2019	Yes	Yes	£750.00
GR-36-2019	Yes	Yes	£750.00
GR-37-2019	Yes	Yes	£750.00
GR-38-2019	Yes	Yes	£484.00
GR-40-2019	Yes	Yes	£750.00
GR-41-2019	Yes	Yes	£750.00
GR-42-2019	Yes	Yes	£750.00
GR-43-2019	Yes	Yes	£750.00
GR-44-2019	Yes	Yes	£750.00
GR-45-2019	Yes	Yes	£750.00
GR-47-2019	Yes	Yes	£720.00
GR-48-2019	Yes	Yes	£750.00
GR-49-2019	Yes	Yes	£750.00
Total Awarded			**£27,722.00**

END

Minor Grants Community Works Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 9

2 Applications recommended for funding

22% of applications awarded

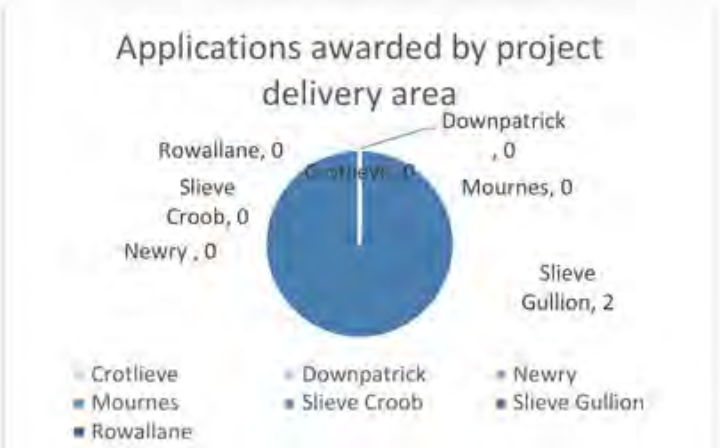
Amount requested from successful applicants **£37,380.00**

Total amount awarded **£37,380.00**

Of the 9 applications:

7 failed basic eligibility = 78%

0 Failed stage 2 scoring = 0%



Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 7 Fail

Group	Passed basic eligibility
MG-2-2019	No
MG-3-2019	No
MG-5-2019	No
MG-6-2019	No
MG-7-2019	No
MG-8-2019	No
MG-9-2019	No

Stage 2 = 0 fail

Group	Passed basic eligibility	Stage 2

Stage 1 & 2 = 2 Passed & 2 Recommended for Awarded

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
MG-1-2019	Yes	Yes	£22,455.00
MG-4-2019	Yes	Yes	£14,925.00
Total Awarded			**£37,380.00**

END

Minority Communities Fund Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 18

15 Applications recommended for funding

83% of applications awarded

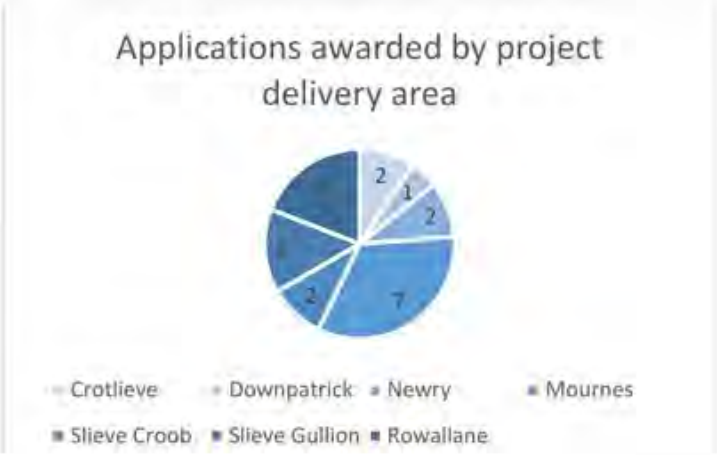
Amount requested from successful applicants **£7,420.00**

Total amount awarded **£7,130.00**

Of the 18 applications:

0 failed basic eligibility = 0%

3 Failed stage 2 scoring = 17%



Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 0 Fail

Group	Passed basic eligibility

Stage 2 = 3 fail

Group	Passed basic eligibility	Stage 2
MF-13-2019	Yes	No
MF-14-2019	Yes	No
MF-15-2019	Yes	No

Stage 1 & 2 = 15 Passed & 15 Recommended for Awarded

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
MF-1-2019	Yes	Yes	£500.00
MF-2-2019	Yes	Yes	£500.00
MF-3-2019	Yes	Yes	£500.00
MF-4-2019	Yes	Yes	£500.00
MF-5-2019	Yes	Yes	£500.00
MF-6-2019	Yes	Yes	£500.00
MF-7-2019	Yes	Yes	£500.00
MF-8-2019	Yes	Yes	£500.00
MF-9-2019	Yes	Yes	£500.00
MF-10-2019	Yes	Yes	£500.00
MF-11-2019	Yes	Yes	£500.00
MF-12-2019	Yes	Yes	£500.00
MF-16-2019	Yes	Yes	£450.00
MF-17-2019	Yes	Yes	£500.00
MF-18-2019	Yes	Yes	£180.00
Total Awarded			**£7,130.00**

END

Policing and Community Safety Partnership Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 42

38 Applications recommended for funding

90% of applications awarded

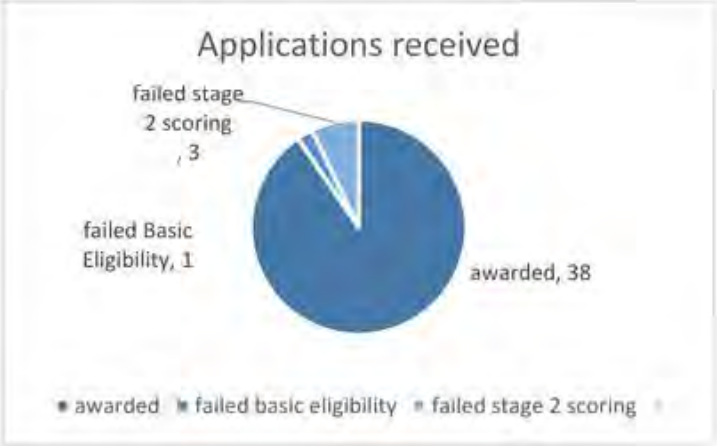
Amount requested from successful applicants **£50,850.00**

Total amount awarded **£50,850.00**

Of the 42 applications:

1 failed basic eligibility = 2%

3 Failed stage 2 scoring = 7%



Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 1 Fail

Group	Passed basic eligibility
PCSP-10-2019	No

Stage 2 = 3 fail

Group	Passed basic eligibility	Stage 2
PCSP-5-2019	Yes	No
PCSP-23-2019	Yes	No
PCSP-30-2019	Yes	No

Stage 1 & 2 = 38 Passed & 38 Recommended for Awarded

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
PCSP-1-2019	Yes	Yes	£1,500.00
PCSP-2-2019	Yes	Yes	£1,500.00
PCSP-3-2019	Yes	Yes	£1,500.00
PCSP-4-2019	Yes	Yes	£1,500.00
PCSP-6-2019	Yes	Yes	£1,500.00
PCSP-7-2019	Yes	Yes	£910.00
PCSP-8-2019	Yes	Yes	£1,290.00
PCSP-9-2019	Yes	Yes	£1,500.00
PCSP-11-2019	Yes	Yes	£1,500.00
PCSP-12-2019	Yes	Yes	£1,500.00
PCSP-13-2019	Yes	Yes	£1,500.00
PCSP-14-2019	Yes	Yes	£1,200.00
PCSP-15-2019	Yes	Yes	£1,000.00
PCSP-16-2019	Yes	Yes	£500.00
PCSP-17-2019	Yes	Yes	£1,500.00
PCSP-18-2019	Yes	Yes	£1,500.00
PCSP-19-2019	Yes	Yes	£1,500.00
PCSP-20-2019	Yes	Yes	£1,100.00
PCSP-21-2019	Yes	Yes	£1,500.00
PCSP-22-2019	Yes	Yes	£1,100.00
PCSP-24-2019	Yes	Yes	£1,100.00
PCSP-25-2019	Yes	Yes	£1,500.00
PCSP-26-2019	Yes	Yes	£1,500.00
PCSP-27-2019	Yes	Yes	£1,500.00
PCSP-28-2019	Yes	Yes	£1,100.00
PCSP-29-2019	Yes	Yes	£1,500.00

Appendix

PCSP-31-2019	Yes	Yes	£1,500.00
PCSP-32-2019	Yes	Yes	£800.00
PCSP-33-2019	Yes	Yes	£1,500.00
PCSP-34-2019	Yes	Yes	£1,000.00
PCSP-35-2019	Yes	Yes	£1,500.00
PCSP-36-2019	Yes	Yes	£1,500.00
PCSP-37-2019	Yes	Yes	£750.00
PCSP-38-2019	Yes	Yes	£1,500.00
PCSP-39-2019	Yes	Yes	£1,500.00
PCSP-40-2019	Yes	Yes	£1,500.00
PCSP-41-2019	Yes	Yes	£1,500.00
PCSP-42-2019	Yes	Yes	£1,500.00
Total Awarded			**£50,850.00**

END

Sports Facility Capital Financial Assistance 2019/20 Call 2

Newry, Mourne and Down District Council

Applications received 15

6 Applications recommended for funding

40% of applications awarded

Amount requested from successful applicants **£541,292.00**

Total amount awarded **£249,375.00**

Of the 15 applications:

6 failed basic eligibility = 40%

0 Failed stage 2 scoring = 0%

Appendix

Breakdown of Applications per stage and final amount recommended for award.

Stage 1 = 6 Fail

Group	Passed basic eligibility
CSD-4-2019	No
CSD-9-2019	No
CSD-10-2019	No
CSD-11-2019	No
CSD-13-2019	No
CSD-14-2019	No

Stage 2 = 0 fail

Group	Passed basic eligibility	Stage 2

Stage 1 & 2 = 9 Passed & 6 Recommended for Awarded (in order of score and ranked)

Group	Passed basic eligibility	Stage 2	Recommended Amount Awarded
CSD-6-2019	Yes	Yes	£70,000.00
CSD-3-2019	Yes	Yes	£96,153.50
CSD-12-2019	Yes	Yes	£23,771.50
CSD-1-2019	Yes	Yes	£19,200.00
CSD-8-2019	Yes	Yes	£15,275.00
CSD-2-2019	Yes	Yes	£24,975.00
CSD-15-2019	Yes	Yes	£0
CSD-7-2019	Yes	Yes	£0
CSD-5-2019	Yes	Yes	£0
Total Awarded			**£249,375.00**

- An additional £291,917.00 would be required to fund all successful Sport Facility Capital applicants.

END

Report to:	Active and Healthy Community
Date of Meeting:	17th June 2019
Subject:	Kilbroney Park – Pitches
Reporting Officer (Including Job Title):	Michael Lipsett, Director: Active Health and Communities
Contact Officer (Including Job Title):	Paul Tamati, Assistant Director: Leisure and Sport

For decision	**X**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree the appointment of a design team and consultants to establish detailed costs and business plan for the upgrading of playing pitch provision within the Kilbroney Park lands area.
1.2	**Background** Kilbroney Park Pitches, within the Kilbroney public parkland area, currently includes x1 Grass Soccer Pitch and x1 GAA Pitch. The main users of these pitches are Rossown FC and Rostrevor GAA who use these pitches for training and matches. The Kilbroney Park and Rostrevor Forest Vision and Masterplan was commissioned by Council in 2015 and identified upgrading these pitches as part of an activity recreation zone and an activity hub. In January 2017 Council published its Sports Facility Strategy which further referenced the above Kilbroney Park Masterplan and reiterated the need to upgrade Kilbroney playing pitches.
2.0	**Key issues**
2.1g	The two current pitches do not meet the required medium standard set out by their governing bodies and need significant investment to bring them up to this standard. Currently there is no provision for changing facilities which creates challenges regarding safeguarding and accommodation for both senior and junior teams using the pitches.
3.0	**Recommendations**
3.1	**That the Committee agree to proceed with the appointment of a design team and business plan consultants for the upgrading of Kilbroney playing pitch provision**.
4.0	**Resource implications**
4.1	There are no resource implications with budget requirements accommodated within existing budgets.

5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	A rural Needs Impact Assessment is not required at this time
7.0	**Appendices**
7.1	None
8.0	**Background Documents**
8.1	None

Report to:	Active and Healthy Community
Date of Meeting:	17th June 2019
Subject:	Community Trail Plans SLA with ORNI 2019-2020
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision	**X**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree a Service Level Agreement (SLA, Appendix 1) with Outdoor Recreation NI (ORNI) for 2019 – 2020 at a cost of £116,400.
1.2	**Background** In March 2018, AHC agreed to develop a detailed SLA with ORNI for a Community Trail Plans for the district. In April 2018, an initial 1 year SLA with ORNI was approved by AHC Committee focussing on 1. Develop Management Plans for the Trails. 2. Identify a range of trails and landholder agreements. 3. Formal access agreements in place for all identified trails. 4. Develop a range of Community trail hubs to be 'shovel ready'. 5. Funding to be secured for up to 5 Community trail hubs. To date plans and planning permission for Community Trails at Drumkeeragh Forest, Corry Wood, Seaforde Plantation, Tievenadarragh have been developed and currently awaiting Planning approval.
2.0	**Key issues**
2.1g	• In order to progress works on the above identified trails, develop the potential for further trails within all 7 DEA districts, and to secure external funding to progress these projects, a new SLA for 2019 – 2020 is required.
3.0	**Recommendations**
3.1	That the Committee approve the Service Level Agreement with Outdoor Recreation NI (ORNI) for the 2018-2019 financial year at the total cost of £116,400.
4.0	**Resource implications**
4.1	The total cost of £116,400 has been included in the 2019 -2020 budget estimates for both revenue and capital.

5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified
7.0	**Appendices**
	Appendix 1 – SLA from ORNI to Newry, Mourne and Down District Council 2019 – 2020.
8.0	**Background Documents**
	None

SERVICE LEVEL AGREEMENT BETWEEN

NEWRY, MOURNE AND DOWN DISTRICT COUNCIL and OUTDOOR RECREATION NORTHERN IRELAND

2019-2020

This paper details the basis for the work to be undertaken under the Service Level Agreement for the year 2019– 2020.

Under the Council's 2018-2019 SLA with Outdoor Recreation NI, considerable work has been started on the delivery of Community Trails across the Council area.

ORNI secured in principle £1.1 million towards the delivery of 6 Community Trails and work has begun to deliver three of these on the ground. The priority for 2019-2020 SLA is therefore to ensure

- the completion, launch and promotion of the first three Community Trails (Saul, Ballynahinch and Tievenadarragh)
- deliver a further three Community Trails on the ground (Corry Wood, Seaforde, Drumkeeragh)
- put in place Management Plans for 3 Community Trails
- put in place a mechanism to allow user numbers across NMDDC Community Trails to be collected and collated on a regular basis
- initiate work on the feasibility of a further 6 Community Trails (one in each DEA except for Slieve Croob).

The following table lists the priority projects for 2019-2020.

Projects (see below for detail)	**Cost**
1. Delivery and promotion of the following **3** Community Trails (Capital projects) • Saul • Ballynahinch and • Tievenadarragh Forest	£10,000
2. Delivery on the ground of the following **3** Community Trails (Capital projects) • Seaforde Plantations • Corry Wood and • Drumkeeragh Forest Community Trails	£30,000
3. Preparation of individual site-based **Management Plans for 3 Community Trails** (Saul, Ballynahinch, Tievenadarragh)	£8,600
4. Community Trail **Data Collection** for **6 sites**	£2,800
5. Feasibility/scoping/assessing/developing 7 new Community Trails.	£65,000
TOTAL	**£116,400 of which £40,000 capital**

DETAIL OF WORK TO BE UNDERTAKEN

1. Delivery, launch and promotion of the following Community Trails

a. Saul b. Ballynahinch c. Tievenadarragh Forest.

Through its 2019-2020 SLA, ORNI completed for the above trails: all funding applications and business cases, led and managed the design process for the trails and car parking process (Tievenadarragh), the tender process to appoint the CPM team and contractors, all environmental assessments, planning applications, liaison with the private landowners, FSNI and Council reference license agreements, permissive paths agreements, development agreements etc.

Outdoor Recreation NI will -

1. Act as the first point of contact on all enquiries on this project.
2. Act as the Project Manager throughout the build period. This includes daily liaison with CPM and contractors, attending on-site Project Steering Group meetings and responding to all issues raised at these, on-going liaison with funders throughout and ensuring that the project is delivered to the standard and expectations of all involved.
3. Delivery of all non-ancillary items. This includes the writing of all trailhead and information panels etc, liaising with graphic designer, getting sign-off from Council, FSNI, preparation of detailed inventory for all signage and waymarking including mapping and overseeing implementation of all items on the ground.
4. Manage all financial draw down of funding for the project.
5. Work with the Council and partners to launch the Community Trails and promote on WalkNI.com and OutmoreNI.com.

Total cost £10,000

2. Delivery of the following 3 Community Trails

a. Corry Wood b. Seaforde Plantations c. Drumkeeragh Forest.

Through its 2019-2020 SLA, ORNI completed for the above trails: expressions of interest applications for Corry and Seaforde, full funding application and business case for Drumkeeragh, led and managed the design process for the trails and car parking (Drumkeeragh), the tender process to appoint the CPM team for all three trails, all environmental assessments, planning applications, liaison with the private landowners, FSNI and Council reference license agreements, permissive paths agreements, development agreements etc

Outdoor Recreation NI will -

1. Act as the first point of contact on all enquiries on this project.
2. Secure funding for all three projects by completing the necessary funding applications and business cases, etc. Respond to all queries from funders and provide additional specific information as requested.
3. Work with Council to put in place the necessary licence/ lease agreements with Forest Service and private landowners to allow works to take place and to allow Council to take over the management, maintenance and liability for the project elements (and any others deemed necessary).
4. Act as the Project Manager for the Council throughout the build period.
5. This includes working with the CPM team to tender for and appoint contractors, daily liaison with CPM and contractors, attending on-site Project Steering Group meetings and responding to all issues raised at these, on-going liaison with funders throughout and ensuring that the project is delivered to the standard and expectations of all involved.

6. Delivery of all non-ancillary items. This includes the writing of all trailhead and information panels etc, liaising with graphic designer, getting sign-off from Council, FSNI, preparation of detailed inventory for all signage and waymarking including mapping and overseeing implementation of all items on the ground.
7. Co-ordinate the financial draw down of all funding for the project with the various funders

Total cost	**£30,000**

3. Site-Based Management Plans for 3 Community Trails (Saul, Ballynahinch, Tievenadarragh Forest)

It is essential that with the launch of each Community Trail a specific site-based Management Plan is prepared to allow the Council to efficiently manage the facilities for which it is responsible.

Outdoor Recreation NI will – prepare for each of the 3 Community Trails a Management File. The Management Plan will cover:

Management Plan

- Details of all products for which Council is responsible
- Management roles including
    - Generic risk assessment
    - Details of operational inspections and random fault reporting
    - Suggested inspection programme
    - Identification of hazards including hazard risk assessment pro forma and priority ratings for addressing defects
    - Maintenance including maintenance report pro forma
    - Ensuring quality
    - Generic events policy and application form (for event organisers)
    - Information for users including onsite panels and online
    - Liaison
    - Accident reporting procedure
    - Review

Maintenance Plan(s)

- For outdoor recreation products delivered by ORNI, e.g. trails, signage
- Details of each product including -
    - Description
    - Safety statement
    - Location map
    - Photos
    - Specification of materials used
    - List of Suppliers
    - Inspection Regime
    - Maintenance Requirements
    - Other relevant information, e.g. design drawings

Detailed inventories of outdoor recreation products managed by Council

To include –

- Trail Design prescription document (as provided by Council to Contractor prior to construction)
- Shapefiles for all trails including (compatible with ARC GIS)
- To be provided by Contractor –
    - As built plans for trails and all associated infrastructure
    - Risk assessments for all trails
- Contractor details for trails, car parks, installation of way marker posts and panels.

- Waymarking including design layouts for each way marker post, all disks, shapefiles for all locations (compatible with ARC GIS), specifications
- Signage including safety signage, directional signage
- Information panels and including specification
- Counter information including photos and specification
- For the above products, details of all suppliers (design and production) and any warranties/ defects periods will be included (where information is held)

Record keeping

This section will be set up with sections where records of inspections, maintenance works, tree survey etc. can be inserted by Council once management commences. In addition, details of any contracted work completed (post completion) will be inserted here.

Total cost	**£8,600**

4. Community Trail – Data Collection.

In order to assess whether the Community Trails within the Council area are successful in terms of being well used by the local community and to help justify further expenditure on Community Trails within the Council area, it is essential that Council has some indication of the numbers using each Trail. As part of each capital project, counters are installed.

Outdoor Recreation NI will:

- Collect 4 times a year data on the following Community Trails and compile into a Summary Report at the end of the year:

1. Tobar Mhuire, Crossgar (multi-use)
2. Bunker's Hill, Castlewellan (multi-use)
3. Castleward, Strangford (multi-use)
4. Ballynahinch Rugby Club (walking)
5. Saul GAC (walking)
6. Tievenadarragh Forest, near Seaforde (walking)

Address any issues with counters that are not working with the supplier.

Repeat above for potential new Community Trails coming through on the ground during 2019-2020

1. Corry Wood, Castlewellan
2. Seaforde Plantations
3. Drumkeeragh Forest

Total cost	**£2,800**

5. Feasibility of 6 new Community Trails.

With stage 1 now complete for all 7 DEAs and considerable work in 2019-2020 being concentrated in the Slieve Croob DEA, attention will now focus on the other 6 DEAs across the Council area. A minimum of 1 Community Trail in each DEA will be investigated.

Outdoor Recreation NI will:

1. Downpatrick DEA part 1– investigate an extension to the Quoile River Walk (Steam Boat Quay to Castle Island Bird Hide and onwards to Delamont). This would be an important first step in linking Downpatrick and Killyleagh. It should be noted that consultation and buy-in from land owners and governing bodies as well as the issues surrounding wildlife disturbance need to be considered across this special designated area.

Work will include:

- Consultation with local community to establish demand

- GIS mapping of proposed route
- Identify and consultation with land owners (National Trust and DAERA are known to date)
- Liaison with NIEA's HED and NED to discuss issues surrounding designations and wildlife disturbance
- Assessment of feasibility and costing of trail options (identify trail surface, infrastructure etc.)
- Identify funding opportunities
- Undertake all necessary environmental surveys (it is anticipated that external consultants will need to be brought in given the complexity of the route)
- Submit planning applications

Downpatrick DEA part 2– investigate a Community Trail linking Hollymount Forest to Downpatrick and on to Steamboat Quay. This will also include an investigation of linking Downpatrick to key heritage features of the area including: Inch Abbey, the Cathedral, The Mound etc

Work will include:

- Identify how link the trail with the recently designed Community trail in Hollymount Forest
- Consultation on relationship with proposed Greenways
- GIS mapping of proposed route
- Identify and consultation with land owners
- Liaison with NIEA's HED and NED to discuss issues surrounding designations
- Assessment of feasibility and costing of trail options (identify trail surface, infrastructure etc.)
- Undertake all necessary environmental surveys (it is anticipated that external consultants will need to be brought in given the complexity of the route)
- Submit planning applications
- Identify funding opportunities

2. Rowallane, Mournes, Crotlieve, Newry and Slieve Gullion DEAs
At this stage the Community Trail identified for detailed feasibility for the above 5 DEAs has not been finalised.

Officers will carry out a review of those trails identified in stage 1 of the Community Trail Planning process and identify a potential trail in each to be taken forward. It is likely that these will involve trails on public land or where there is 100% 'buy-in' from the local community.

For each of the identified trails work will include:

- Prioritisation of trail to be taken forward.
- Consultation with local community to establish demand and buy in
- Site visit to proposed trails and GIS mapping of proposed routes
- Consultation with identified land owners and permission to proceed
- Consultation with all statutory consultees (NED, HED, FSNI, DfC DFI)
- Assessment of feasibility and costing of trail options (identify trail surface, infrastructure etc.)
- Ensure any other statutory requirements are met e.g HRA
- Facilitate Council staff in putting together the necessary Development Agreements, Permissive Path Agreements, Licence Agreement etc as necessary
- Undertake all necessary environmental surveys
- Submit planning applications
- Identify funding opportunities

Total cost	**£65,000**

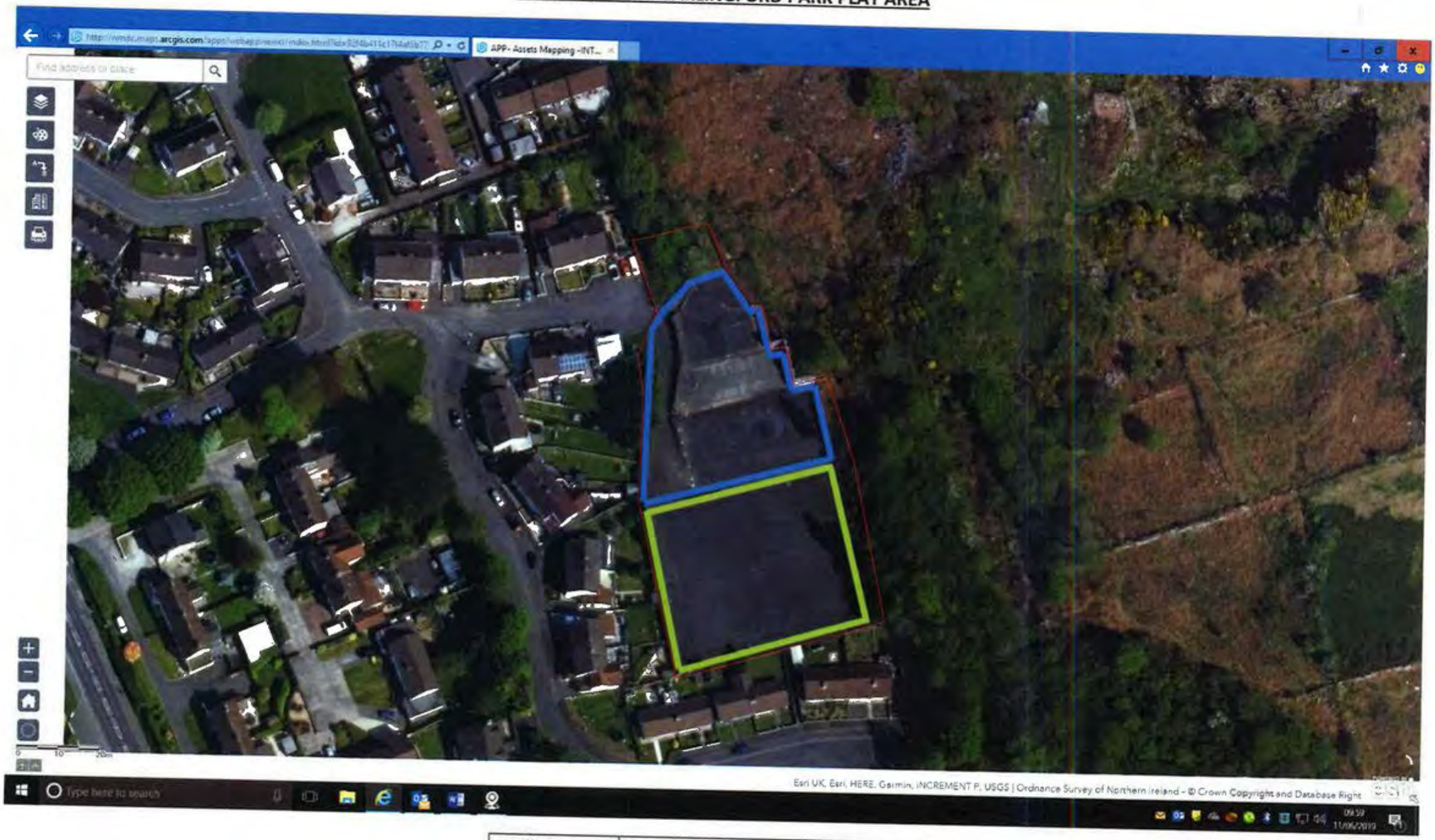
Report to:	Active and Healthy Community
Date of Meeting:	17th June 2019
Subject:	Carlingford Park Play Area
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to progress the construction of a new Play Park Area at Carlingford Park, in Newry at a revised cost of £180,605.08.
1.2	**Background** • The Play Strategy approved by Council in 2017, outlines the need for a new Play Park in the Carlingford Park Area in Newry. • In February 2019, committee approved the commencement of the public consultation for the new play park. • As part of the Play Strategy Consultation process, which was progressed as a result of a committee request in February 2019 (EHC/021/2019), Carlingford Park was identified as a preferred location. • Although a budget of £100k is identified in the Play Strategy for this area, as part of the consultation process and ongoing anti-social behaviour issues in the area, an enhanced design including improved site security and removal of a derelict handball court has increased the park design to £180,605.08, as per appendix 1.
2.0	**Key issues**
2.1g	• Anti-social behaviour, particularly in the Carlingford Park area in Newry has been well publicised. • The public play strategy consultation process, further highlighted the need to positively address the anti-social behaviour in the area, with a new play park well supported. • The public consultation highlighted that initial plans may not fully address anti-social behaviour in the area, with an enhanced design including retaining of the 'kick about area' seen as a preferred option. • The derelict site needs substantial work before the park can be installed and it is anticipated the project will be broken down into 3 stages including 1. The removal of the derelict handball wall, construction of disability ramp, closing off of footpaths, steps and building up of the surface and a finishing coat of 802sq metres of tarmac. 2. The installation of perimeter security fencing of the site with addition fencing between the new play park and the football pitch area.

	3. A final stage of instillation of the Play park.
3.0	**Recommendations**
3.1	**That the committee agree to approve the construction of a Play Area in Carlingford Play in Newry at a revised budget of £180,605.08.**
4.0	**Resource implications**
4.1	Additional Capital budget is required; however it is anticipated that this will be realised through efficiencies in the Play Strategy Capital Scheme as a result of securing external funding for other projects within the scheme.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified
7.0	**Appendices**
	Appendix 1: Area Map
8.0	**Background Documents**
	None

PROPOSED NEW CARLINGFORD PARK PLAY AREA



Redline	Council Boundary
Blue Line	New Play Park
Green Line	Existing Kickabout Area

Back to Agenda

Report to:	Active and Healthy Community
Date of Meeting:	17th June 2019
Subject:	Kilkeel River Walk Lights Upgrade
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision	**X**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree Kilkeel River Walk Lights Upgrade at a revised cost of £34,000.
1.2	**Background** Upgrading of Kilkeel River Walk Lights has been identified due to ongoing vandalism in this area which has led to further anti-social behaviour issues. A budget of £25,000 had previously been allocated to upgrading these lights and is currently in the capital budget.
2.0	**Key issues**
2.1g	A procurement process for this project has now been completed by the Councils Estates Team, additional works for replacing all cabling has resulted in a total cost of £34,000 to complete project.
3.0	**Recommendations**
3.1	**That the committee agree to proceed with the Kilkeel River Walk Lights Upgrade at a cost of £34,000.**
4.0	**Resource implications**
4.1	There are no resource implications with budget requirements accommodated within existing budgets.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified
7.0	**Appendices**
	None
8.0	**Background Documents**
	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	Monday 17th June 2019
Subject:	Leasing of Council Land known as Rosconnor Playing Fields, Strangford Playing Fields and the Back Pitch, Greenbank, Newry
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree Leases at a peppercorn rent for: • Rosconnor Playing Fields, Downpatrick to Teconnaught GAC for the term of 5 years. • Strangford Playing Fields, Strangford to Strangford FC for the term of 5 years • The Back Pitch, Greenbank, Newry to Newry AFC for the term of 25 years
1.2	**Background** • In April 2017 AHC committee approved a formal consultation process with sports and community organisations who had expressed an interest in leasing Council land. • Three of the clubs who lodged Business cases as part of that process achieved a total score higher than the minimum pass mark. • In June 2018 this Committee agreed to Council granting the following 5-year Leases, arising out of the expression of interest process: - 1. Lease of Rosconnor Playing Fields, Downpatrick to Teconnaught GAC 2. Lease of Strangford Playing Fields, Strangford to Strangford FC 3. Lease of the Back Pitch, Greenbank, Newry to Newry AFC
2.0	**Key issues**
2.1g	• Council's Sports and Community Facility Management and Leasing Procedures Policy states that if an organisation can demonstrate that it can manage a facility Council may consider a longer-term arrangement with the organisation. • Newry AFC, has been responsible for the management of the Back Pitch for a number of years. • In line with the aforementioned policy a 25-year Lease of the Back Pitch, Greenbank, Newry to Newry AFC should be considered, subject to completion of all legal arrangements being in place. • Each of the aforementioned Clubs have requested a peppercorn rent. • Once a Lease is granted, the Clubs will be responsible for the maintenance of the pitches which will result in a saving to Council as we will no longer be required to maintain same.

	• The Business Case for the lease of this land at a peppercorn rent should be provided to the Department of Communities for their approval.
3.0	**Recommendations**
3.1	**That the committee agree,** subject to Departmental Consent to the following Leases at a peppercorn rent: • Lease of Rosconnor Playing Fields, Downpatrick to Teconnaught GAC for the term of 5 years. • Lease of Strangford Playing Fields, Strangford to Strangford FC for the term of 5 years. • Lease of the Back Pitch, Greenbank, Newry to Newry AFC for the term of 25 years. •
4.0	**Resource implications**
4.1	Land and Property Services Valuation Costs and officers time in completing the legal formalities.
5.0	**Equality and good relations implications**
5.1	Having considered this matter, it is not anticipated the proposal will have an adverse impact upon equality of opportunity or good relations.
6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered in this matter and a rural needs impact assessment is not required.
7.0	**Appendices**
	None
8.0	**Background Documents**
	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17th June 2019
Subject:	Action Renewables Energy Association Membership
Reporting Officer (Including Job Title):	Eoin Devlin, Assistant Director of Health & Wellbeing
Contact Officer (Including Job Title):	Sheena McEldowney, Head of Sustainability

For decision	**X**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to the Council acquiring Partner Membership of Action Renewables Energy Association (AREA) at a cost of £1,000 with benefits reviewed annually before membership renewal is agreed.
1.2	**Background** Action Renewables Energy Association (AREA) are a group of Renewable Energy Professionals whose goal is to: • Establish a secure renewable energy policy framework in Northern Ireland • Protect existing renewable energy investments • Support the development of the renewable energy sector
2.0	**Key issues**
2.1	Membership of this association has many benefits including: • Free attendance for two people to Action Renewable training seminars (minimum five per year) • Advice and support on future Council Renewable Energy projects • Networking and collaboration opportunities with Renewable Energy experts • Opportunity to request Action Renewable Lobbying for Council • Information requests available on renewable technologies, policies and incentives ensuring Council is kept up to date • Free attendance for two people at Action Renewables Annual Event • Councils logo and endorsement on Action Renewables website
3.0	**Recommendations**
3.1	**That the Council agree to acquire Partner Membership of Action Renewables Energy Association (AREA) at a cost of £1,000 with benefits reviewed annually before membership renewal is agreed.**

4.0	**Resource implications**
4.1	Resources available within existing budget.
5.0	**Equality and good relations implications**
5.1	No equality or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified.
7.0	**Appendices**
7.1	None
8.0	**Background Documents**
8.1	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	All Party Group on Sustainable Development - Nominees
Reporting Officer (Including Job Title):	Eoin Devlin, Assistant Director
Contact Officer (Including Job Title):	Sheena McEldowney, Head of Sustainability

For decision	X	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to nominate two Councillors as representatives to the All Party Group on Sustainable Development.
1.2	**Background** Sustainable NI, Nilga and the Institution of Engineers held an event entitled 'Global Goals, Local Action' to raise awareness of the Sustainable Development Goals amongst Elected Members in November 2018. The event included speakers covering topics such as Sustainable Tourism, Sustainable Food, Responsible Business and Planning and Resilience. A copy of the event summary report is attached in Appendix 1. As a follow up to the event an All Party Group on Sustainable Development is to be established. The purpose of the group is to be an Elected Members 'Champion' Group for Sustainable Development.
2.0	**Key issues**
2.1	Two elected member volunteers are sought from the Council to sit on the new group. The group will meet on a quarterly basis.
3.0	**Recommendations**
3.1	Nominate two Councillors as representatives to the All Party Group on Sustainable Development.
4.0	**Resource implications**
4.1	Travel and subsistence to attend meetings.
5.0	**Equality and good relations implications**
5.1	No equality or good relations adverse impact is anticipated
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified.
7.0	**Appendices**
7.1	Appendix 1: 'Global Goals Local Action' Summary Report

	Appendix 2: Letter from SNI Re: All Party Sustainable Development Group
8.0	**Background Documents**
8.1	None

Moderator: Dr Cara Augustenborg

Speakers:
Andrew Cassells, Chair, Sustainable NI
Councillor Eddie Thompson, Deputy Mayor Ards & North Down Borough Council
David Lindsay, Director of Environment, Ards & North Down Borough Council
Michael Ewing, Coordinator of the Irish Environmental Network - Keynote
Dr Susann Power, Ulster University – Sustainable Tourism
Pete Gray, Arup/ICE -Planning & Resilience
Gillian McKee, BITCNI – Responsible Business
Alan McVicker, Strategic Investment Board/Circular Economy Steering Group – Resource Management
Tom Andrews, Sustainable Food Cities – Sustainable Food
Colin Jess, Social Enterprise NI – Responsible Procurement

All presentations will be available via Sustainable NI website (www.sustainableni.org) – under SD Forum, Resources. If you do not have log in details please contact emma@sustainableni.org ,

Background to the SDGs

The Sustainable Development Goals (SDGs) are a call for action by all countries – poor, rich and middle-income – to promote prosperity while protecting the planet. They recognize that ending poverty must go hand-in-hand with strategies that build economic growth and address a range of social needs including education, health, social protection, and job opportunities, while tackling climate change and environmental protection.

On 1 January 2016, the 17 Sustainable Development Goals (SDGs) of the 2030 Agenda for Sustainable Development — adopted by world leaders in September 2015 at an historic UN Summit — officially came into force. Over the next fifteen years, with these new Goals that universally apply to all, countries will mobilize efforts to end all forms of poverty, fight inequalities and tackle climate change, while ensuring that no one is left behind.

The SDGs build on the success of the Millennium Development Goals (MDGs) and aim to go further to end all forms of poverty.

More information: www.un.org/sustainabledevelopment/

Audience breakdown

Local Authority	Elected Members	21
	Officers	13
Other Public Sector		9
Private Sector		15
Education		1
Other/unknown		2
Total		**61**

Summary of Presentations

All presentations will be available via Sustainable NI website (www.sustainableni.org) – under SD Forum, Resources. If you do not have log in details please contact emma@sustainableni.org

The following report summarises these presentations, questions & answers and table discussions.

Welcomes

Dr Cara Augustenborg welcomed attendees to the event.

'An honour to facilitate this event'.

#LocationActionNI

Andrews Cassells, Chair, Sustainable NI introduced Sustainable NI. One of the aims of the event was to develop an All Party Group on Sustainable Development comprising of elected members from all 11 councils to be Sustainable Development 'Champions'.

All Party Group on
Sustainable
DEVELOPMENT

Councillor Eddie Thompson, Deputy Mayor of Ards and North Down Borough Council welcomed attendees to the iconic venue, Coffee Cure and to Ards and North Down Borough Council region. He highlighted the importance of looking at the power Council's have and how they can be used to make local changes which will influence the wider sustainability agenda.

David Lindsay, Director of Environment, Ards & North Down Borough Council introduced the audience to the on-going work on sustainability at Ards and North Down Borough Council.

Summary:

- Sustainable Development must begin with strategic intent
- Ards and North Down Borough Council have a comprehensive recycling service forming part of the Sustainable Waste Resource Strategy
- Sustainable procurement – tackling single use plastics and lobbying local organisations
- Sustainable Business – aim to be best in class. The Council already has the Environmental Management System ISO14001 & is an active participant in the Arena Benchmarking Survey
- Sustainable Lifestyles – expansion of greenways, 'refill' scheme, expansion of electric car charging network
- Empowering local communities – Live Here Love Here fund, Best Kept Awards
- Council members in Ards and North Down Borough Council are enthusiastic advocates of Sustainable Development

Michael Ewing, Coordinator of the Irish Environmental Network, Keynote speaker.

- Emphasised the need for Local government to adopt the UN Sustainable Development Goals
- Introduced the Coalition 2030 initiative.
- Human Society is entirely reliant on the natural environment and on its present course is destined to destroy the ecosystems on which it relies for its existence.
- Highlighted the aspiration to migrate to a circular economy
- Sustainable Development Goals – cross cutting objectives, integrated, inter-related and 'leave no-one behind'

- For SDGs to be a success – look to partnership processes, working together, look at wellbeing, and integrate SDGs in local development plans and council work in a holistic way.
- The 5P's – Planet, People, Prosperity, Peace & Partnership.

- Example – SDG 11 Sustainable Cities & Communities
  - protecting natural heritage
  - effects of water related disasters
  - waste collection
- **What kind of world are we leaving for our children?**

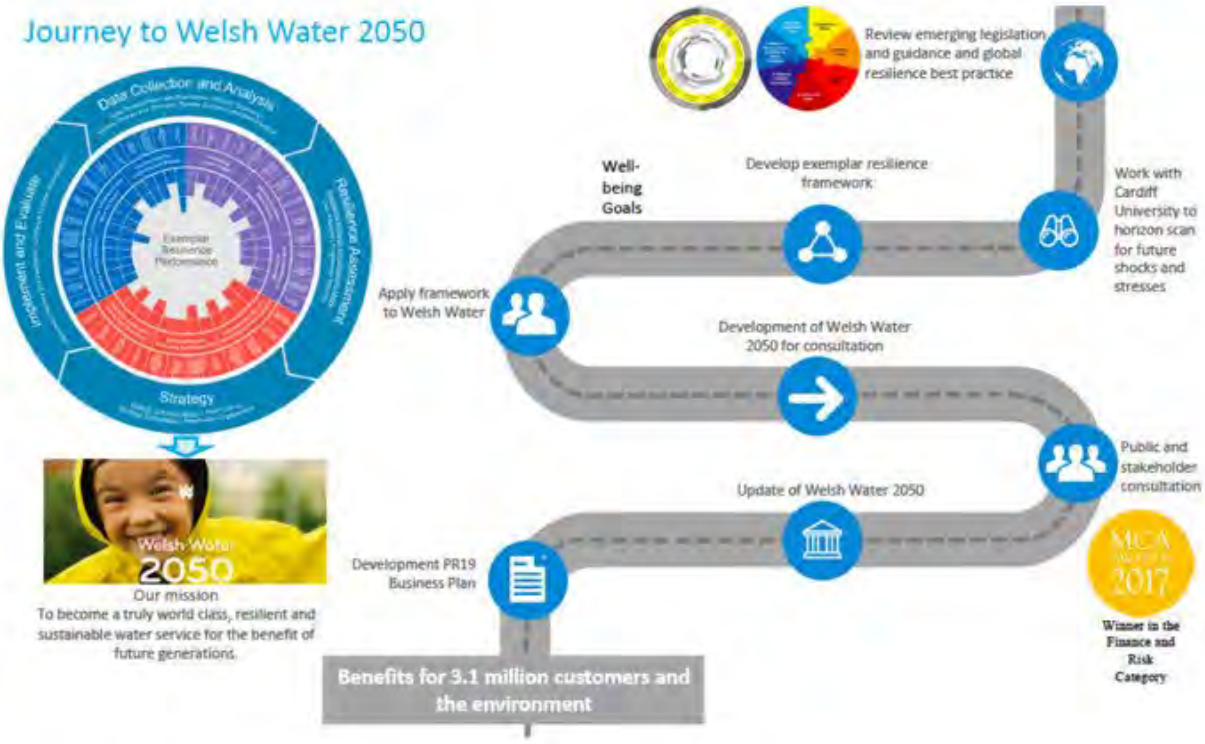
Showcasing local, practical action on the Sustainable Development Goals

Dr Susann Power, Ulster University – Sustainable Tourism

- Sustainable tourism serves as a means for wider sustainable development
- Creating a balance – unspoilt nature, economic health, subjective well being
- Talk to the people living in the tourist destination.
- Stakeholder participation
- Avoid eco-tokenism
- Vital to monitor and mitigate
- The Burren & Cliffs of Moher UNESCO Global Geopark – local businesses come together and share best practice

Pete Grey, Arup/ICE – Planning & Resilience

- Engineering is vital to SDGs
- Sustainable Development was already in Planning legislation but goals need to be established in local priorities in order to ensure they are taken forward
- Example – Welsh Water



- Example CLIMATE – Derry City and Strabane District Council http://www.derrystrabane.com/Subsites/CLIMATE
- Arup are mapping the goals within their projects portfolio.
- 'Living with Water' project, Belfast City Council – protect from flooding, enhance the environment, facilitate city growth

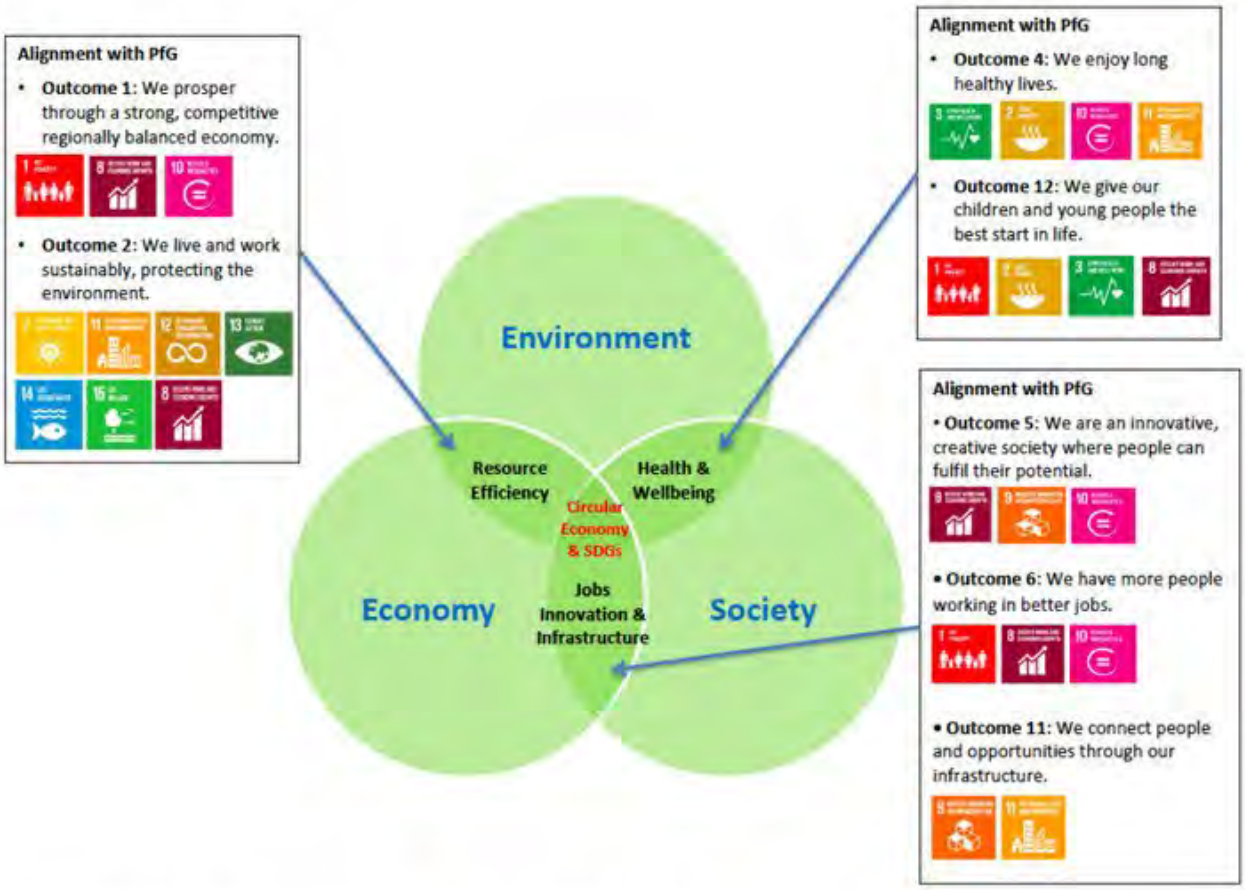
Gillian McKee, Business in the Community – Responsible Business

- Business are a critical partner for achieving the SDGs
- SDGs are an opportunity for business led solutions, connect business strategies, offer a framework to shape and communicate their strategies and to stabilise societies and markets
- Top 5 Goals to business – Decent Work & Economic Growth; Climate Action; Industry, Innovation & Infrastructure; Quality Education; Good Health & Well-being

- Example: Danske Bank – Quality Education (SDG4); to make people and businesses financially confident and secure by supporting entrepreneurs; Decent Work & Economic Growth (SDG8); Climate Action (SDG13) by aiming for Zero Net Carbon Economy
- Example: Adams – produces a Carbon Neutral Beer by supporting Responsible Production & Consumption (SDG12) by using local barley and Climate Action (SDG13) by reducing the need for pesticides
- Act together!

Alan McVicker, Strategic Investment Board, Circular Economy Steering Group – Resource Management

- 2010 – started thinking and talking about the Circular Economy
- 2014/15 amount of recycling overtook amount landfilled
- Must maintain value within a product, value is lost through recycling
- Traditional import materials and export waste – use some of the waste we produce
  Example: Industrial Symbiosis matches the waste of one organisation with the raw material of another
- Embedding Sustainability into Communities
  Example: LIVE Smart – Causeway Coast & Glens Borough Council
- The Circular Economy, SDGs and Programme for Government/Community Planning can be mapped together



Tom Andrews, Sustainable Food Cities – Sustainable Food

- Solving food and poverty does contribute to Sustainable Development
- Have to work at council level on food
- Lowest paid jobs are in the food industry
- Stopping food waste could feed 3 billion people per year
- Example: Sustainable Fish Cities Durham – a collective pledge by universities, restaurants, schools, hospitals and councils to only serve sustainably sourced fish
- Example: Sugar Smart – 1207 organisational pledges to reduce sugar
- Mapping and tackling food poverty & diet related ill health

Colin Jess, Social Enterprise NI – Sustainable Procurement

- Social Value maximised what the public pound gets back
- Social Value is not just about financial transactions. It includes health, happiness, well-being, inclusion and empowerment
- Consider Social Value in Procurement
- Should be legislation for Social Value, eg The Public Services (Social Value) Act 2012 (England & Wales) – a Social Value Bill
- Example: Salford

Environmental Wellbeing

- Improving energy efficiency – reducing overall energy use and making sustainable energy choices
- Improving living conditions and housing
- Reducing waste and emissions
- Increasing recycling and reuse of resources
- Use of sustainable products
- Ethical purchasing e.g. Fairtrade products
- Improving the place – public spaces and parks

Economic wellbeing

- Reducing worklessness
- Workforce resilience – keeping people in work
- Quality local employment e.g. living wage
- Economic and social growth – creating a better place for business to grow facilitating good links between with local business
- Reducing poverty and increasing living standards

Community Empowerment

- Increased resilience and peoples ability to help themselves
- Reducing dependence on public services
- Improving personal aspirations – education, employment, living standards, social interactions
- Increasing positive role models
- Reducing health inequalities – closing the health gap in deprived areas
- Supporting equalities and cohesion

Social Wellbeing

- Increasing opportunities for volunteering
- Increased ownership and involvement of service users, wider community including work with C&V and SE
- Making services accessible and reach those most in need
- Reducing crime and disorder
- Improving family life

- Example: Belfast City Council – Leisure Transformation Programme incorporated a number of social value clauses including employing the unemployed/economically inactive and supply chain opportunities
- Meet the buyer events and encourage young entrepreneurs
- Fund resources for social projects

Summary of Q&A

Question: We are not doing enough so what else can we do? How do we move from Green Wash to Green Action?
Answers:

- Keep up the challenge on businesses
- Open and honest conversations
- Look at shareholder value – are businesses actually doing good?
- It's not always about maximisation of profits but should be about optimisation
- Young people look more to the environmental & social issues so changes are coming – these are our future investors and shareholders
- Business can be a force for positive change
- Needs a cultural mind-shift
- Key to influence business is to work with educational services
- Personal influence – look at your pension funds – are they being invested in something sustainable?
- Look at Procurement Contracts & Strategies
- Needs to be embedded in legislation

Question: Should we be having a 'knee-jerk' reaction to banning plastics? Removing the plastics to make it easier to recycle?
Answer:

- 60% of plastics in the environment come from textiles and car tyres
- need to rethink plastics
- carbon ramifications on other materials for packaging

Question: How do we make tourism sustainable when by its nature it is not sustainable?
Answer:

- Need to change the language about sustainable tourism
- It should be about moral tourism
- more emphasis making transportation more efficient – efficient air and sea travel

Question: North/South similarities or differences?
Answer:

- opportunity for learning between the north and the south
- There is an SDG stakeholder forum in Ireland
- Lower Councillor participation in the south
- Shift in Ireland within the past 6-9 months within the media on sustainability
- There are some good cross border projects on going
- Cross border opportunity on food would be good

Table Discussions

Questions – How can individuals and organisations engage with the Sustainable Development Goals?

Table 1

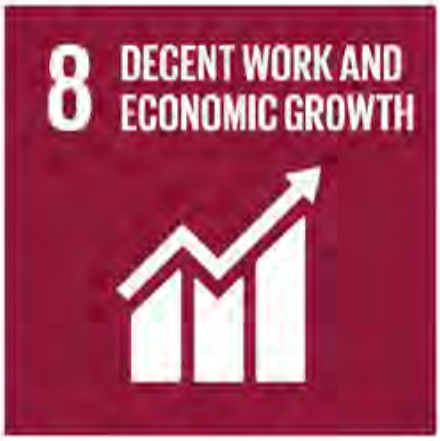
- Links to Programme for Government
- Housing – right to live in a safe place
- Health & Well-being
  - Muddy boots – schools growing, health & nutrition, Eco-schools
  - Churches & youth groups
- NI Housing Executive – Community Asset Transfer, eg Peas Park, Belfast - £1.5m invested in Social
- NILGA – Education on Community Planning and equitable society

Table 2

- Geothermal – high capital cost/low running costs
- PV Panels – long payback period, linked to water heater
- Make renewable energy more affordable
- Higher building efficiency
- Link building efficiency to Building standards and planning approval
- Are the public aware of the fuel sources used to generate heat/electricity

- Transport system (EV's)
    - Education – location of charging points, battery life, range anxiety
    - Whole life costs – damage to the environment
    - Power source to charge battery – is it renewable?
    - Public transport – accessibility & convenience
    - Cars – mind set, younger generation do not use cars, alternative transport options?

Table 3



- Real Living Wage -should be mandatory.
- Public Service wage freezes have an impact on in-work poverty
- Leadership to local economy – public sector should lead the way, private sector will follow. Social economy sector must also address
- Upskilling – smarter ways to do things, pathways to progress, opportunities to develop and grow
- Education is key – Goal 4
- Move away from zero hours contracts
- Social enterprises are bad at this. At odds with ethos.
- Agency workers – conditions not always as good as for directly employed workers
- Put a 'local' aspect on social clauses
- Put an economic value on volunteering
- Economic and social value being monitored on Antrim & Newtownabbey Borough Council
- Small/start-up businesses should be mentored by larger, established businesses

Table 4

- Effective urban planning
- Create jobs and prosperity without straining land resources – how can this be mitigated?
- Issues – congestion, access to services, housing, infrastructure, pollution – how can this be mitigated?
- Impact of changing society and demographics, eg Aging population, Brexit, reduced investment
- What do we want to influence?
  - Community Planning -partnerships – covers all SD goals
  - Media (need positive champions)
  - Community Influence – partnership and grassroots around an issue
    - need to frame the debate around an issue they can own
    - Cultural shift – co-production and behavioural shift
    - Citizens Assembly – NI Voluntary/pilot
- Sustainable Development as a concept needs to be tangible
- How is national policy translated into local action? eg Well-being of Future Generations (Wales) Act 2015 (essentially Sustainable Development goals)
- Local Development Plan – LDP is key to developing sustainable cities
- Don't always need to start with objective but we can push issues towards Sustainable Development goals

Table 5

- Shareholders – the right letters to the right people
  - avoid investing in Fossil Fuels
  - disinvest/reinvest (Smartifications)
  - NI could be a leading example by supporting investment into the right shareholders
- Social enterprises – support these
  - remanufacture items (electrical items)
  - support circular economy
  - social local enterprises supports young people
  - target young people for employment, develop their skills
  - identify economic benefits – employment, affordable items
  - difficulty with space for expansion – options for satellite sites and council support
  - Social co-operatives
- Adaption
  - Councils' responsibility to adapting and protecting communities and people and creating sustainable resilient societies, eg SUDs (Sustainable Urban Drainage Systems)
  - Implement sustainable & resilient measures
  - Find a way to report on adaptation & implementation – how can councils monitor and report progress, how can councils identify risks and vulnerabilities
  - Develop and encourage use of clean energy to reduce carbon emissions across councils & sectors within councils

Sustainable NI
89 Loopland Drive
Belfast BT6 9DW

T: 028 9045 5770
E: info@sustainableni.org
sustainableni.org

Cllr Mark Murnin
Chairperson's Office
Newry Mourne and Down District Council
Oifig an Iúir
Newry Office
O'Hagan House
Monaghan Row
Newry
BT35 8DJ

19 December 2018

Dear Mr Chairman

Development of an All Party Group on Sustainable Development

All Party Group on
Sustainable
DEVELOPMENT

Sustainable NI, Nilga and Institution of Civil Engineers recently organised an event entitled Global Goals, Local Action (23 November 2018, Coffee Cure, Bangor), hosted by Ards and North Down Borough Council. The event was to raise awareness of the 17 international Sustainable Development Goals and how they are being, and could be, implemented at a local level.

The event included a range of speakers covering topics such as Sustainable Tourism, Planning and Resilience, Sustainable Food and Responsible Business. A copy of the report summarising the event has been included with this letter and the presentations are available via the Sustainable NI website – under SD Forum (registration is required).

This event was developed in association with Nilga and was therefore designed for Elected Members. We had 21 members from across Northern Ireland in attendance. However, the event was not solely for members and other council officers and public sector representatives attended along with the private sector.

A further aim of the event is to develop an All Party Group on Sustainable Development. This group would be an Elected Members 'Champion' Group for Sustainable Development.

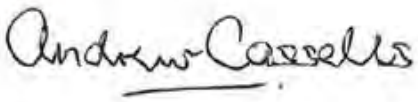
I would expect this group to meet on a quarterly basis with the first meeting expected to meet in March 2019. Date, time and location be to be agreed. This first meeting with be chaired by Mr Andrew Cassells, Chair, Sustainable NI.

I am writing to request for 2 Elected Member volunteers from your council area to sit on this new group. I would ask that these members have a keen interest for Sustainable Development and that perhaps they attended the event on Friday 23 November 2018 (although this is not essential).

I appreciate that elections are pending in May and we may need new volunteers following this but I feel that it is more worthwhile to progress things for now.

If you would like any additional information or to discuss further please contact Emma Adair emma@sustainableni.org .

Sincerely,



Andrew Cassells

Chair, Sustainable NI

Cc Chief Executive

Report to:	Active and Healthy Communities
Date of Meeting:	17 June 2019
Subject:	Adoption of Motor Neurone Disease Charter by Newry, Mourne and Down District Council
Reporting Officer (Including Job Title):	Eoin Devlin, Assistant Director Health and Wellbeing
Contact Officer (Including Job Title):	Sinead Trainor, Senior Environmental Health Officer (Health Improvement)

For decision	x	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** That the Committee consider and agree to • Pass the resolution to adopt the charter and arrange a publicity event to mark the official signing of motion. • Request a member of the Motor Neurone Disease Association to attend a council meeting to give a short presentation around the condition and what it means for people living with this palliative condition.
1.2	**Background** In October 2018 Councillor O Muiri proposed a Notion of Motion to Newry, Mourne and Down District Council to adopt the Motor Neurone Disease (MND) Charter. This report brings forward the required actions
2.0	**Key issues**
2.1	MND is a fatal, rapidly progressing disease that can leave people locked in a failing body, unable to move, talk and eventually breathe. It kills around a third of people within a year of diagnosis, and more than half within two years. There is no cure. Unfortunately, MND is still little understood and this contributes to many people with the disease not receiving the care and support they need. The MND Charter was launched to change this. The MND Charter is made up of 5 points: 1. The right to an early diagnosis and information 2. The right to access quality care and treatments 3. The right to be treated as individuals and with dignity and respect 4. The right to maximise their quality of life 5. Carers of people with MND have the right to be valued, respected, listened to and well-supported. By adopting the MND Charter, the council agrees to promote the Charter and make it available to all councillors, council staff, partner organisations and health and social care professionals who deliver services for the council. The Council will raise awareness of MND and what good care looks like for those living with this devastating disease, as stated in the Charter, and do everything we can as the council to positively influence the quality of life for local people with MND and their carers living in our community.

3.0	**Recommendations**
3.1	**That the Committee:** • **Pass the resolution to adopt the charter and arrange a publicity event to mark the official signing of motion.** • **Request a member of the Motor Neurone Disease Association to attend a council meeting to give a short presentation around the condition and what it means for people living with this palliative condition.**
4.0	**Resource implications**
4.1	The above recommendations will be completed within existing resources.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified.
7.0	**Appendices**
7.1	Motor Neurone Disease – A Guide for Councillors in Northern Ireland
8.0	**Background Documents**
8.1	None

Making sure people with MND have access to the right services

People with MND typically find their care needs are complex and can change rapidly. This combination of complexity and rapid progression poses a major challenge to health and social care services.

Many services and professionals are involved in caring for someone with MND. These include: health professionals in both specialist and local centres, social workers, therapists, hospices, equipment services, housing services and the benefits system. This complex web of support is essential to enable people with MND to live their lives as fully as possible and die with dignity.

It is therefore vital that these services are well co-ordinated, and that policy-makers and professionals always consider and plan for the care needs of people with MND.

Your Northern Ireland MND Association Branch contact details are:

E-mail: mndani@hotmail.com

www.mndani.com

@MNDA_NI

MND Association
PO Box 246 Northampton NN1 2PR
Telephone: 0207 250 8447
Email: campaigns@mndassociation.org

www.mndassociation.org

Registered charity no. 294354

5/16

mnda
motor neurone disease association

30% of people with MND die within 12 months of diagnosis

Motor neurone disease: a guide for councillors in Northern Ireland

This short guide is designed to help you understand motor neurone disease (MND) and how you can support your constituents with MND.

About motor neurone disease (MND)

MND is a fatal, rapidly progressing disease that affects the brain and spinal cord.

It can leave people locked in a failing body, unable to move, talk and eventually breathe.

A person's lifetime risk of developing MND is up to one in 300.

It kills around 30% of people within 12 months of diagnosis, more than 50% within two years.

It affects people from all communities.

It has no cure.

How you can help as a councillor

As a councillor you can help improve the quality of life for people with MND in your community, and support them to live as an independent life as possible.

What you can do:

Champion the MND Charter

Help make a difference to people with MND and their carers in your area by encouraging your council to adopt the MND Charter*

CHAMPION THE CHARTER ON YOUR DOORSTEP

Adopting the Charter is a simple way for you and your council to raise awareness of the needs of people with MND and the importance of the right care, in the right place, at the right time.

For more information visit www.mndassociation.org/mndcharter

Support people with MND in your constituency

Your constituents may contact you to:

- Ask you to support the *Champion the Charter* campaign.
- Ask you to help raise awareness and support local people with MND by attending an event or meeting.
- Ask for your help when they face difficulties accessing local services.
- Ask you to support a local campaign to change or improve local services.

If you want to meet people with MND in your area and find out how you can support them, please contact your your local volunteer-led Northern Ireland branch at www.mndani.com.

Keep up to date on social media

Follow our campaigning work on Facebook and Twitter to keep up to date on issues affecting people with MND and their carers.

@mndcampaigns

@mndcampaignsNI

/mndcampaigns

*The MND Charter is a statement of respect, care and support that people with MND and their carers deserve and should expect.

How the MND Association helps

The MND Association is the only national charity in England, Wales and Northern Ireland focused on MND care, research and campaigning. A separate organisation covers Scotland www.mndscotland.org.uk

We fund an MND Care Network covering the whole of Northern Ireland in partnership with Health and Social Care Trusts.

We employ a Regional Care Development Adviser who is in touch with people living with MND and working to influence local health and social care service providers. In 2015, we issued more than 46,000 pieces of care information to people with, or affected by, MND. In Northern Ireland we also have a volunteer-led branch and Association visitors providing information and emotional support.

We fund and promote research that leads to new understanding and treatments, bringing us closer to a cure for MND. The value of our whole research grant portfolio on 1 February 2016 was £13.1 million.

In 2014, our support grants to help people with MND and their carers manage the disease, for example by helping to pay for home adaptations to allow for continued home living, totalled £893,000. We spent £247,000 on lending out specialist equipment to help people with MND carry out day to day tasks and communicate.

Much of the funding provided by the MND Association for care, equipment and other support for people with MND pays for services that could or should be provided by health and social care services in Northern Ireland. We will never walk away from a person with MND, or carer, who is in need, but we do not believe charitable funds should be relied on to cover shortfalls in statutory service provision.

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Consultation on reshaping Stroke services
Reporting Officer (Including Job Title):	Eoin Devlin Assistant Director Health and Wellbeing
Contact Officer (Including Job Title):	Eoin Devlin Assistant Director Health and Wellbeing

For decision	X	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to return the attached consultation response to the Department of Health.
1.2	**Background** Stroke is a major health issue in NI with around 2,800 people being admitted to a hospital each year and 36,000 stroke survivors living in our communities. It is important that every opportunity is taken to secure excellent care for people after a stroke and give them the best possible chance of a good recovery. The Department of Health are currently consulting on proposals to change the way that Stroke services are provided. The proposals if adopted would mean that current provision at Daisy Hill Hospital would no longer be available
2.0	**Key issues**
2.1	The impact of stroke can be devastating. While there are treatments which can help deliver significantly improved outcomes, stroke patients in NI do not always get access to the optimum treatment: • TIA clinics are only available 5 days per week, yet we know that people should receive specialist assessment within 24 hours of symptoms occurring because of the risk of stroke; • There are variations in the length of time taken to provide thrombolysis to stroke patients when we know that thrombolysis is more effective the earlier it is given; • Thrombectomy is only available from Monday – Friday 08.30am – 5.30pm which means that not all those who could potentially benefit have access to the treatment; • Research undertaken by the Stroke Association indicates that the needs of stroke survivors in the community, including emotional and cognitive needs and support for family carers, are not being met. Services across NI have been improving in recent years, but there is still significant variation across sites in terms of the time patients are seen and the treatment they access. This consultation outlines a number of commitments about how they intend to do so. In 2017, the Health and Social Care Board and the Public Health Agency carried out a pre-consultation seeking views on a range of proposals to reshape stroke services. Over 800 responses, together with a further 3,000 template responses were received.

	Those responses indicated high levels of support for some of the proposals but also significant levels of concern about the impact that implementation of some of the changes may have. Several the responses to the pre-consultation focused on the potential impact on travel times for patients, their carers, and their families, particularly for those living in more rural areas. In response to those views, the University of Calgary and the University of Exeter were commissioned to undertake modelling to provide a robust evidence base on the impact of reshaping hospital based stroke services, including on travel time and clinical outcomes. The attached document, which follows on from the pre-consultation, is the next stage in a long term process to improve stroke services in NI. Services across NI have been improving in recent years, but there is still significant variation across sites in terms of the time patients are seen and the treatment they access. The consultation does not propose to have any of the services identified in our local hospitals.
3.0	**Recommendations**
3.1	**That the Committee agree to return the attached Consultation response questionnaire.**
4.0	**Resource implications**
4.1	None
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	Officers confirm due regard to rural needs has been considered.
7.0	**Appendices**
7.1	Appendix 1: Reshaping-sc-questionnaire Appendix 2: Rrscs-consultation-document
8.0	**Background Documents**
8.1	None.

Department of Health
An Roinn Sláinte
Männystrie O Poustie
www.health-ni.gov.uk

RESHAPING STROKE CARE – SAVING LIVES, REDUCING DISABILITY

Consultation Questionnaire

26 March 2019

Prepared by:

Hospital Services Reform

Department of Health

Annexe 3

Castle Buildings

Stormont Estate

Belfast BT4 3SQ

Phone: (028) 9076 5643

Email: StrokeConsultation@health-ni.gov.uk

Website: https://www.health-ni.gov.uk/consultations or

https://consultations.nidirect.gov.uk/

RESPONDING TO THE CONSULTATION

You can let us know your views by completing our Consultation Questionnaire online via **https://consultations.nidirect.gov.uk/**

You can also complete our Consultation Questionnaire and submit the completed document to the Department by email or by returning a completed hard copy to the address below.

If this document is not in a format that suits your needs, please contact us and we can discuss alternative arrangements. Before you submit your response, please read the information at **Annex A** about the effect of the Freedom of Information Act 2000, the Environmental Regulations 2004, the Data Protection Act 2018 (DPA) and the General Data Protection Regulation (EU) 2016/679 on the confidentiality of responses to public consultation exercises.

For further information about how we process your information please see the following link which will take you to the Departmental Privacy Notice:
https://www.health-ni.gov.uk/sites/default/files/publications/health/DoH-Privacy-Notice.pdf

Section 1 – Consultee Details

Name (Optional):	**Eoin Devlin**
Organisation and job title (if applicable):	**Assistant Director of Health and Wellbeing** **Newry Mourne and Down DC**
Address:	**O'Hagan House Monaghan Row Newry**
Email:	**eoin.devlin@nmandd.org**

Are you responding on behalf of your organisation or as an individual?

Organisation	**X**	**(Please Tick)**
Individual		

If replying as an individual, please indicate if you do not wish for your identity to be made public.

Whilst not essential, it would assist the Department in analysing responses if responding on behalf of an organisation you could provide details of who your organisation represents and, where applicable, how the views of members were assembled.

The last date for responses to this consultation is **31July 2019.**

Responses should be sent to:

Email: **StrokeConsultation@health-ni.gov.uk**

By post: Hospital Services Reform
Department of Health
Annexe 3
Castle Buildings
Stormont Estate
Belfast BT4 3SQ

Section 2 – Questions relating to Reshaping Stroke Care – Saving Lives, Reducing Disability in Northern Ireland

These questions should be read in conjunction with the proposals set out in the accompanying consultation document.

Question 1: Do you agree that stroke patients should be admitted as soon as possible to specialist centres to deliver the best possible outcomes? (Please Tick)	**Yes**	X
	No	
Please use this space to expand your answer.		
This Council is not willing to support further withdrawal of services from our local hospitals. We have a large geographical area with an isolated rural community and there are already significant issues in accessing Health services. We would prefer that the specialist care available is provided locally		

Question 2: Do you agree that, to deliver an effective service, staff need the opportunity to build and develop their specialist expertise? (Please Tick)	**Yes**	**X**
	No	

Please use this space to expand your answer:

We would want that this expertise is developed and is available at our local hospitals

Question 3: Do you agree that delivering better outcomes should take priority over additional travel time? (Please Tick)	**Yes**	
	No	**X**

Better outcomes should be delivered taking account of the possible long travel times for our rural district. We would reiterate that we want the most modern service within our own local area

Question 4: Would the availability of additional measures such as the availability of an air ambulance address your concerns about additional travel time? (Please Tick)	**Yes**	**X**
	No	

Should an increased air ambulance service be available and able to be guaranteed this could allay some of our concerns.
This does not take away from our wish to have local specialist stroke services

Question 5: Which of the options do you think delivers the maximum benefit for stroke patients in NI? (Please Tick)	**Option A**	
	Option B	
	Option C	
	Option D	
	Option E	
	Option F	

None of these options provide for ASU or HASU within our District

Question 6: Are there additional options that we have not considered? (Please Tick)	**Yes**	
	No	

Please use this space to expand your answer:

Section 3 – Equality and Human Rights

Section 75 of the NI Act 1998 requires departments in carrying out their functions relating to NI to have due regard to the need to promote equality of opportunity:

- between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- between men and women generally;
- between person with a disability and persons without; and
- between persons with dependants and persons without.

You may wish to refer to the Equality Screening, Disability Duties and Human Rights Assessment Template at **https://www.health-ni.gov.uk/consultations**

Question 7: Are any of the options set out in the consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the 1998 Act? (Please Tick)	**Yes**	**X**
	No	
If yes, please state the group(s) and provide comment on how these adverse impacts could be reduced or alleviated in the proposals: **The Council believes that those with disabilities and persons with dependants will be adversely impacted by increased travel times.**		
Question 8: Are you aware of any indication or evidence – qualitative or quantitative – that any of the options set out in the consultation document may have an adverse impact on equality of opportunity or on good relations? (Please Tick)	**Yes**	**X**
	No	
If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact: **The Council believes that services should be retained at the local hospitals.**		

Question 9: Is there an opportunity to better promote equality of opportunity or good relations? (Please Tick)	**Yes**	**X**
	No	
If yes, please give details as to how: **The Council believes that those with disabilities and persons with dependants will be adversely impacted by increased travel times.**		
Question 10: Are there any aspects of the proposals in the consultation where potential human rights violations may occur? (Please Tick)	**Yes**	
	No	**X**
If yes, please give details as to how:		

Section 4 – Rural Impact

The Rural Needs Act (NI) 2016 became operational on the 1 June 2017 and places a duty on public authorities, including government departments, to have due regard to rural needs when developing, adopting, implementing or revising policies, strategies and plans and when designing and delivering public services. A draft rural needs impact assessment has been prepared against these policy proposals.

Question 11: Are the actions/proposals set out in this consultation document likely to have an adverse impact on rural areas? (Please Tick)	**Yes**	**X**
	No	
We have a large isolated rural population. Implementation of these proposals will take them further away from the necessary services		

Responses must be received no later than 5pm on 31 July 2019.

Thank you for your comments.

ANNEX A

Confidentiality and Access to information Legislation

The Department may publish a summary of responses following completion of the consultation process. Your response, and all other responses to the consultation, may be published or disclosed on request in accordance with information legislation; these chiefly being the Freedom of Information Act 2000 (FOIA), the Environmental Information Regulations 2004 (EIR), the Data Protection Act 2018 (DPA) and the General Data Protection Regulation (GDPR) (EU) 2016/679. The Department can only refuse to disclose information in exceptional circumstances. Before you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The FOIA gives the public a right of access to any information held by a public authority, namely, the Department in this case. This right of access to information includes information provided in response to a consultation. The Department cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential.

If you do not wish information about your identity to be made public please include an explanation in your response. Being transparent and providing accessible information to individuals about how we may use personal data is a key element of the DPA and the General Data Protection Regulation (EU) 2016/679. The Department is committed to building trust and confidence in our ability to process personal information. This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances.

For further information about confidentiality of responses please contact the Information Commissioner's Office on **0303 123 1113** or via https://ico.org.uk/global/contact-us/

Department of Health
An Roinn Sláinte
Männystrie O Poustie
www.health-ni.gov.uk

RESHAPING STROKE CARE

SAVING LIVES, REDUCING DISABILITY

Consultation Document

CONTENTS

GLOSSARY

Acute stroke units –These are dedicated hospital wards used for stroke patients and they require specially trained medical, nursing and therapeutic staff. They provide care and rehabilitation until a person is ready to go home. This is normally from the third day after stroke until discharge to the community.

Early Supported Discharge (ESD) - This is a service provided by Community Stroke Teams. It responds quickly after discharge to continue rehabilitation and support, for those who no longer require hospital services. It should provide therapy at the same intensity as it would have been provided in hospital.

Hyperacute stroke units – This is the phase of care, usually during the first three days, in which a patient is assessed and admitted. Hyperacute stroke units require highly skilled staff, with access to advanced imaging equipment 24 hours a day, seven days a week.

Stroke - A condition caused by impaired blood flow to the brain following a blood clot or a bleed in the brain. Impairments in movement, balance, speech, vision or thinking may result.

Stroke Services National Audit Programme (SSNAP) - SSNAP measures the quality and organisation of stroke care in the NHS and is the single source of stroke data in England, Wales, and Northern Ireland. SSNAP measures both the processes of care provided to stroke patients, and the structure of stroke services (organisational audit) against evidence based standards.

Thrombolysis - Also known as clot busting therapy, this is a medicine which is delivered by an intravenous drip to stroke patients within four and a half hours of the first symptoms of stroke.

Thrombectomy or Clot Removal - A procedure performed by skilled doctors to remove large clots from blood vessels in the brain, usually within six hours of the onset of stroke.

Transient Ischaemic Attack (TIA) - A diagnosis given to some patients where there are temporary symptoms similar to a stroke but that resolve within 24 hours.

FOREWORD

by the Permanent Secretary

Stroke is one of the most devastating health crises anyone can face. And the reality is that, today, the service we provide for those impacted by this is not as good as it could or should be. Put simply, our current model fails users of this service.

In determining how we improve this, we need to be clear that this issue is much more complex than the location of services - while travel time is clearly a consideration, a much more important one is the quality and expertise of the service patients travel to. Currently, stroke services are too thinly spread, and too many units are struggling to maintain sustainable quality care and staffing levels.

The evidence couldn't be clearer – consolidating hospital services into hyperacute stroke units means better care and better outcomes for patients:

- Thrombectomy – the revolutionary stroke treatment involving mechanical retrieval of a clot from the brain – can be available round the clock seven days a week in Northern Ireland (NI) for the first time.

- Thrombolysis - the clot busting drug – can be administered to more patients more quickly by trained staff in dedicated centres of excellence.

- Patients suffering from TIAs - Transient Ischaemic Attack or mini strokes - can have access to TIA clinics 7 days a week, providing specialist assessment within 24 hours of symptoms. Better and more focused care will reduce their risk of full-blown strokes.

This consultation represents the start of a once-in-a-generation opportunity to make stroke care better. By better, I am not focussing on improved processes or access to care, but on patient outcomes - saving lives, significantly reducing long-term disability and taking major steps forward in stroke prevention.

These goals are all within our grasp. But to achieve them we must re-shape current provision to establish a number of Hyperacute Stroke Units. These Units will be suitably staffed, with expert teams on the spot 24 hours a day, seven days a week, ensuring stroke patients have ready access to the latest in diagnostic testing and treatment. These specialist centres will secure improved stroke outcomes, higher patient satisfaction levels and shorter hospital stays.

And, crucially, staff will have increased opportunities to maintain and build their expertise and experience. Only by having higher volumes of patients will that be possible.

Of course, I recognise that change is never easy, and there is a lot to think about – with six different options on the way forward. But it starts with the inescapable premise that change is needed.

We cannot ignore the evidence - consolidating care and expertise will save lives and reduce disability, and maintaining the status quo is simply not good enough.

We can and must do better.

Richard Pengelly
Permanent Secretary,
Department of Health

INTRODUCTION

What is a stroke?

A stroke occurs when blood supply to part of the brain is interrupted by either a blood clot or a bleed, and surrounding brain tissue is damaged or dies.

There are two main types of stroke:

- Ischaemic, caused by a clot blocking or narrowing an artery carrying blood to the brain. Ischaemic strokes are the most common; and
- Haemorrhagic strokes, caused when a blood vessel supplying the brain bursts.

What is the impact of stroke?

Stroke is the single largest cause of adult disability in the UK, the fourth largest cause of death, and two thirds of those who survive stroke have a life changing disability.

Stroke is a major health issue in NI with around 2,800 people being admitted to hospital each year and 36,000 stroke survivors living in our communities. It is important that every opportunity is taken to secure excellent care for people after a stroke and give them the best possible chance of a good recovery.

The number of people in NI experiencing stroke each year is likely to increase in future because of a growing older population, with three out of four people who experience stroke being over the age of 65.

RESHAPING STROKE SERVICES

In 2017, the Health and Social Care Board and the Public Health Agency carried out a pre-consultation seeking views on a range of proposals to reshape stroke services. Over 800 responses, together with a further 3,000 template responses were received.

Those responses indicated high levels of support for some of the proposals but also significant levels of concern about the impact that implementation of some of the changes may have. A number of the responses to the pre-consultation focused on the potential impact on travel times for patients, their carers, and their families, particularly for those living in more rural areas.

In response to those views, the University of Calgary and the University of Exeter were commissioned to undertake modelling to provide a robust evidence base on the impact of reshaping hospital-based stroke services, including on travel time and clinical outcomes. We explore this further later in the document.

We also outline other actions taken to date, including investment in Early Supported Discharge and plans to expand the availability of thrombectomy.

This document, which follows on from the pre-consultation, is the next stage in a long term process to improve stroke services in NI. Services across NI have been improving in recent years, but there is still significant variation across sites in terms of the time patients are seen and the treatment they access.

EXECUTIVE SUMMARY

Stroke is a major health issue in NI with around 2,800 people being admitted to a hospital each year and 36,000 stroke survivors living in our communities. It is important that every opportunity is taken to secure excellent care for people after a stroke and give them the best possible chance of a good recovery.

The impact of stroke can be devastating. While there are treatments which can help deliver significantly improved outcomes, stroke patients in NI do not always get access to the optimum treatment:

- TIA clinics are only available 5 days per week, yet we know that people should receive specialist assessment within 24 hours of symptoms occurring because of the risk of stroke;
- There are variations in the length of time taken to provide thrombolysis to stroke patients when we know that thrombolysis is more effective the earlier it is given;
- Thrombectomy is only available from Monday – Friday 08.30am – 5.30pm which means that not all those who could potentially benefit have access to the treatment;
- Research undertaken by the Stroke Association indicates that the needs of stroke survivors in the community, including emotional and cognitive needs and support for family carers, are not being met.

Services across NI have been improving in recent years, but there is still significant variation across sites in terms of the time patients are seen and the treatment they access. We know that there are steps we can take to strengthen these services and we outline a number of commitments about how we intend to do so.

But, if we are to fully deliver on the potential to improve stroke care, we need to look beyond individual services to consider how and where services are provided.

The single most important factor in delivering better outcomes for stroke patients is the quality of care provided in a stroke unit. Evidence ranging from RQIA reports to audits of performance carried out by the Royal College of Physicians (RCP) and London School of Economics demonstrate that services are falling short. For example, only 40% of stroke patients are admitted to a stroke ward within 4 hours.

Guidance from the RCP and the National Institute for Health and Care Excellence (NICE) recommend that services should be provided in a hyperacute setting in the first few days after a stroke. The services provided in a hyperacute stroke unit are only available to a minority of patients in NI and the treatment available varies significantly depending on location and time of admission. This document proposes that a network of Hyperacute Stroke Units (HASUs) and Acute Stroke Units (ASUs) should be established in NI. This would mean that some patients will go to their nearest Hyperacute Stroke Unit first to get rapid assessment and clot busting therapy, with transfer to the regional thrombectomy centre in Belfast where appropriate. Other patients would go directly to Belfast, bypassing their nearest hospitals.

In order to make this work, it is essential that each stroke service has the specialist staff and facilities to provide rapid brain imaging and treatment on a 24/7 basis so that there are no delays identifying and transferring those patients who require thrombectomy.

This document contains six options for reshaping the current configuration of stroke services and seven commitments for developing stroke care that will be necessary to underpin and support any new model. Each of the options involves consolidating services into a smaller number of centres where patients will be able to access Hyperacute Stroke Care 24 hours a day, 7 days a week.

As part of this work, we commissioned the University of Calgary and the University of Exeter to undertake modelling to provide a robust evidence base on the impact of reshaping hospital-based stroke services, including on travel time and clinical outcomes. It is worth highlighting that, according to this modelling, each of the options considered in this document would offer significantly improved outcomes for patients compared with the way services are currently provided in hospitals.

There are significant challenges within the stroke workforce. We know that there is a challenge in developing and maintaining skills with some hospitals seeing relatively small numbers of stroke admissions. The success of any new service model will be absolutely dependent on staff being employed and deployed in such a way that makes the best use of their skills and which allows them to continue to develop as professionals while providing the services that users and patients need. The patient experience, and their perception of the quality of care they receive, depends in a very significant way on having well-trained, experienced and motivated frontline staff.

The evidence is clear that we need to organise stroke services to give patients with acute stroke the best possible chance wherever they are in NI. It is unacceptable that the stroke treatment people

receive - including access to brain scans and the clot busting drug thrombolysis - should vary according to where they live.

The consultation will run from 26 March 2019 to 18 June 2019. A consultation questionnaire is available at www.health-ni.gov.uk/consultations/reshaping-stroke-care and the Department would encourage everyone to have their say on this important issue.

ABOUT THIS DOCUMENT

Part 1 of this document looks at the current stroke pathway from prevention through to hospital services and support in the community following stroke and considers how services can be further improved. We have made seven commitments to drive this improvement:

COMMITMENT 1: We will identify a regional model for TIA assessment by March 2020 and implement that model by 2022 to deliver a 7 day service of specialist assessment within 24 hours of symptoms.

COMMITMENT 2: By 2022 we will remove the variance in delivering thrombolysis to ensure that patients across NI have timely access to the treatment.

COMMITMENT 3: We will continue to invest in the growth of thrombectomy, increasing hours of operation to Monday – Friday 8am-8pm service by December 2019, and moving to 24/7 service by 2022.

COMMITMENT 4: We will reshape stroke services by 2022 to establish dedicated hyperacute and acute stroke units underpinned by regional service standards to deliver improved outcomes for stroke patients.

COMMITMENT 5: The recently published Stroke Association document 'Struggling to recover' makes six recommendations to improveservices. Alongside the reshaping of hospital services, we are committed to driving improvement in rehabilitation and long-term support and will use the Stroke Association's analysis and recommendations as a blueprint to drive that improvement.

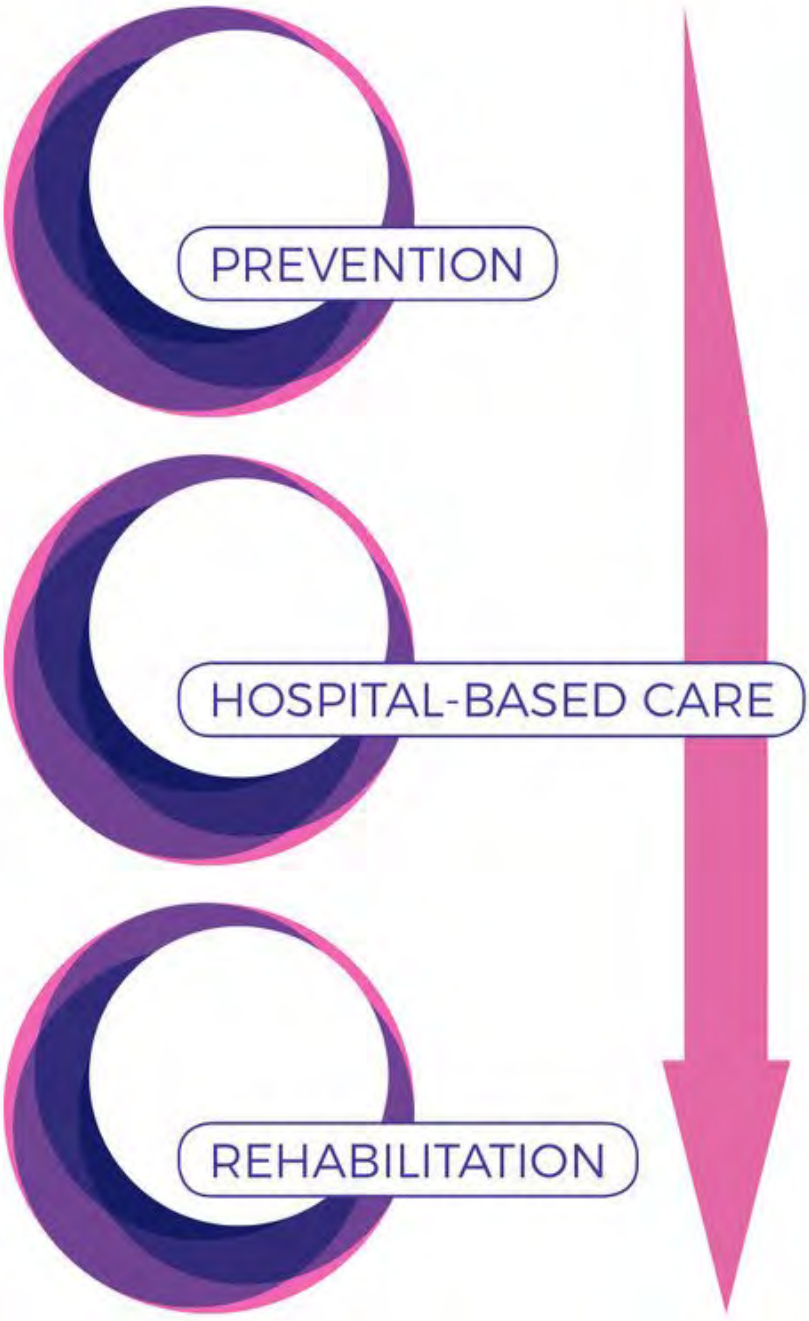
COMMITMENT 6: The HSC will undertake a workforce review to identify the staffing and skill mix required to deliver effective stroke services.

COMMITMENT 7: We will extend the partnership with the charity AANI to enable the Helicopter Emergency Medical Service (HEMS) to provide a secondary response to incidents including strokes by 2022 to improve access to services, particularly from rural areas.

Part 2 of the document focuses on reshaping hospital-based stroke services and outlines how we have used available evidence to develop six options of how hospital-based stroke services can be reshaped. We are particularly keen to hear your views on these options.

1

PART 1:
THE CURRENT STROKE PATHWAY



PREVENTION

It is known that many strokes can be prevented. People at a higher risk of stroke include those with high blood pressure, irregular heartbeat, heart disease and diabetes. Addressing lifestyle factors plays a key role in preventing strokes. This includes smoking cessation, healthy eating, maintaining a healthy body weight, reducing high blood pressure and taking regular exercise. Knowing the signs and symptoms of a stroke and taking appropriate action are important in reducing the devastating effects of stroke. Prevention may also include the treatment of people with atrial fibrillation with medicine to thin the blood, and prevent clots forming that may cause a stroke.

FAST campaign

Knowing the signs and symptoms of a stroke and taking appropriate action are important in reducing the devastating effects of stroke. The F.A.S.T public information campaign has been successful in making people aware of the signs of a stroke and the action to take.

F.A.S.T stands for:

- **Face** – the face may have dropped on one side, the person may not be able to smile, or their mouth or eye may have dropped.
- **Arms** – the person with suspected stroke may not be able to lift both arms and keep them there because of weakness or numbness in one arm.
- **Speech** – their speech may be slurred or garbled, or the person may not be able to talk at all despite appearing to be awake.
- **Time** – it's time to dial 999 immediately if you see any of these signs or symptoms.

Transient Ischaemic Attack (TIA)

A TIA or "mini stroke" is caused by a temporary disruption in the blood supply to part of the brain. This results in a lack of oxygen to the brain and can cause sudden symptoms similar to a stroke. However, a TIA doesn't last as long. Symptoms usually only last for a few minutes or hours and fully disappear within 24 hours.

TIA ASSESSMENT

WHAT?

TIA patients should be treated as a medical emergency because these individuals are at a much higher risk of experiencing a stroke in the following days and weeks.

If treated quickly, the risk of a stroke occurring can be greatly reduced. Guidelines recommend that TIA patients, who are at high risk of a stroke, should be assessed by specialists within 24 hours of their first symptoms.

WHERE?

12 locations - Antrim, Causeway, Craigavon, Daisy Hill, Altnagelvin, South West Acute, Omagh, Royal Victoria, Mater, Ulster, Lagan Valley and Downe hospitals.

LEVELS OF PERFORMANCE

- TIA assessment clinics only receive referrals 5 days a week.
- It is estimated that up to 29% of high risk patients are not being assessed within 24 hours.
- Not all patients are being assessed within 24 hours – likely that these delays result in avoidable strokes.
- Currently more than 800 hospital admissions with TIAs each year – some of these could be avoided if seven day TIA clinics were available.

COMMITMENT TO IMPROVEMENT

COMMITMENT 1: We will identify a regional model for TIA assessment by March 2020 and implement that model by 2022 to deliver a 7 day service of specialist assessment within 24 hours of symptoms.

HOSPITAL-BASED CARE

The current hospital pathway

If an ambulance crew suspects that someone may have suffered a stroke they will bring a patient to one of eight locations to be assessed for a blood thinning treatment called **thrombolysis**. Thrombolysis isn't suitable for all patients, for example those on blood thinning medicine. The treatment is appropriate for approximately 1 in 5 patients.

Patients who have a particular large clot may be suitable for an intervention to remove a clot called **thrombectomy**.

Thrombectomy is a procedure which involves the insertion of a specially-designed clot removal device through a catheter into the blocked artery to remove the clot. This can be provided to some patients not suitable for thrombolysis and also to some patients after having received thrombolysis.

Approximately 1 in 10 stroke patients would benefit from thrombectomy. For every 100 people receiving the procedure, 20 will subsequently be able to lead an independent life, and 38 people will be less disabled after a stroke. This is approximately double what we would expect with normal treatment. However, thrombectomy is not currently available outside of 8.30am – 5.30pm Monday to Friday. Thrombectomy can provide benefits when carried out up to 24 hours after stroke onset, although once a patient has been identified as suitable for the treatment, they should receive it as soon as possible..

All stroke patients regardless of what treatment they receive should be directly admitted to a particular type of stroke ward called a hyperacute stroke unit. In this unit they are monitored very closely, receive all the necessary investigation, tests and assessments and will receive dedicated care from a multidisciplinary team of specialists. This is one of the most important elements of stroke care that greatly enhances the chances of a person making a good recovery.

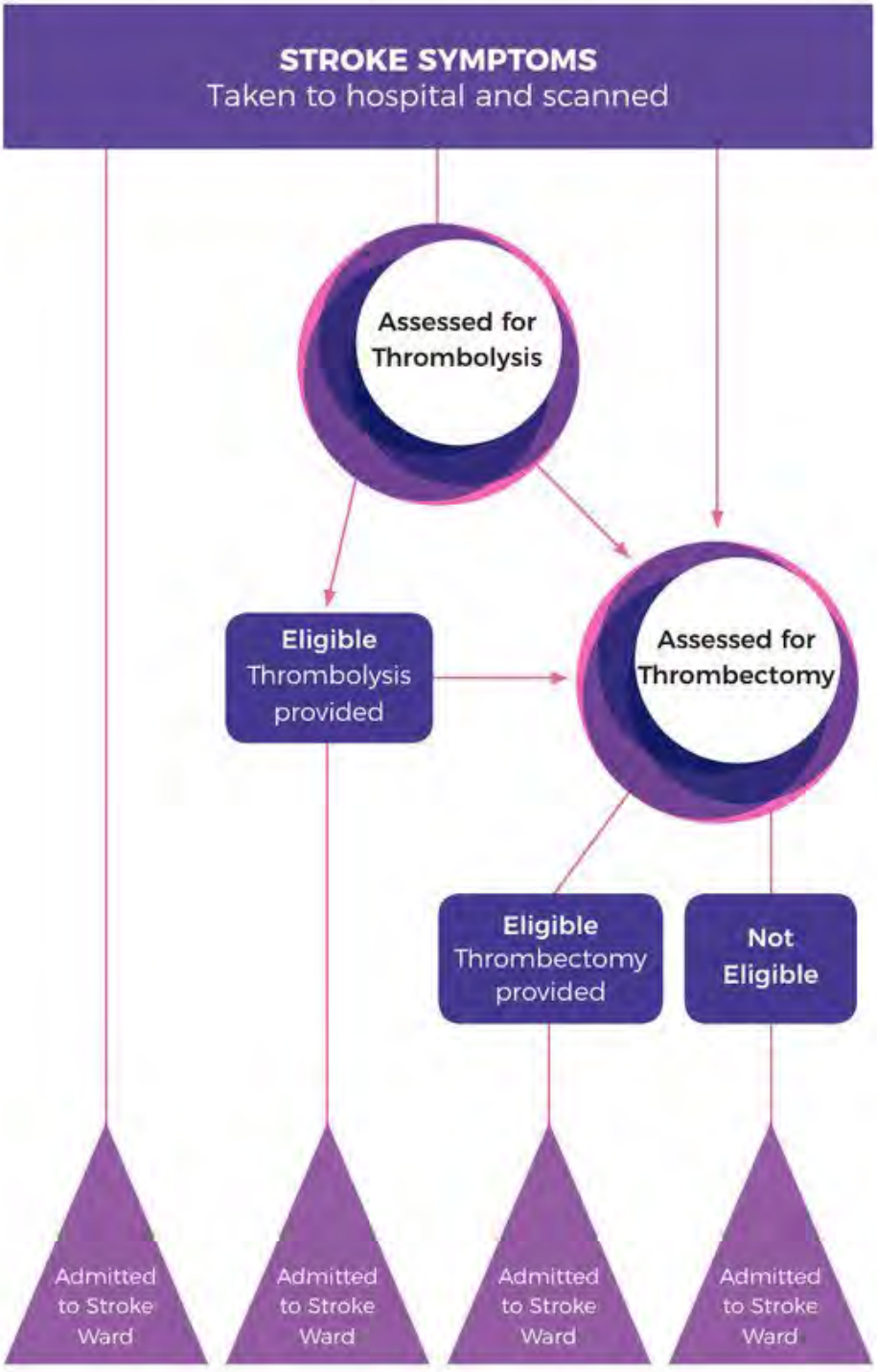
Under our current system, only 4 in 10 patients are admitted to a stroke ward in the first 4 hours.

Following treatment in a hospital, patients can be discharged to their own home with a package of rehabilitation and support or to a non-acute hospital to allow further time for recovery. A small number of patients are also admitted to the Regional Acquired Brain Injury Unit.

Not everyone who is brought to hospital with symptoms similar to a stroke have experienced a stroke. This is because, in some cases,

the symptoms of conditions such as migraine can mimic those of a stroke. Within a reshaped model of care, it will be important to identify stroke mimics and ensure that those individuals who do not require hyperacute stroke care are directed onto the right pathway at the earliest opportunity to ensure they receive care in the right environment.

The stroke pathway is outlined in the diagram below.



We look at each of these services in the following pages.

THROMBOLYSIS

WHAT?

Ischaemic strokes can often be treated using injections of a medication called alteplase which dissolves blood clots and restores blood flow to the brain. This is known as thrombolysis; it can be provided up to 4 and 1/2 hours after a stroke occurs, but is most effective if started as soon as possible after the stroke occurs.

WHERE?

8 locations at hospitals across NI - Antrim, Causeway, Craigavon, Daisy Hill, Altnagelvin, South West Acute, Royal Victoria, and Ulster hospitals

LEVELS OF PERFORMANCE

Within the current eight locations, we know that that there is a wide variation in the number of people who receive thrombolysis. This ranges from just over 10% to just over 20% of stroke patients.

There is also significant variation in the time it takes to provide thrombolysis (door to needle time). From October to December 2018, the percentage of stroke patients who received thrombolysis within 1 hour ranged from just under 40% to 100%.

In the period April 2017 – March 2018, only the South West Acute Hospital met the SSNAP target of providing thrombolysis to a minimum of 15% of stroke patients.

Evidence from other parts of the UK suggests redirecting patients to larger stroke centres improves the rates of access to thrombolysis.

COMMITMENT TO IMPROVEMENT

COMMITMENT 2: By 2022 we will remove the variance in delivering thrombolysis to ensure that patients across NI have timely access to the treatment.

THROMBECTOMY

WHAT?

A new, highly complex procedure which can remove a large clot from the brain following the most severe form of stroke.

Thrombectomy is more effective the earlier it is provided but may be effective in some cases up to 24 hours after the first stroke symptoms. In some cases it can be delivered after this point.

WHERE?

The procedure is only provided at the Royal Victoria Hospital. Due to the specialist expertise required to deliver this service, and the necessary availability of complex support services on the site, it is likely that this could only ever be provided at a single regional centre.

LEVELS OF PERFORMANCE

We are continuing to increase the number of people receiving thrombectomy: in 2018, 122 people underwent the procedure.

However, thrombectomy is currently only available from Monday – Friday 08.30am – 5.30pm. These restricted hours mean that the full potential of thrombectomy to further reduce disability is limited in NI.

COMMITMENT TO IMPROVEMENT

COMMITMENT 3: We will continue to invest in the growth of thrombectomy, increasing hours of operation to Monday – Friday 8am-8pm service by December 2019, and moving to 24/7 service by 2022.

STROKE WARDS

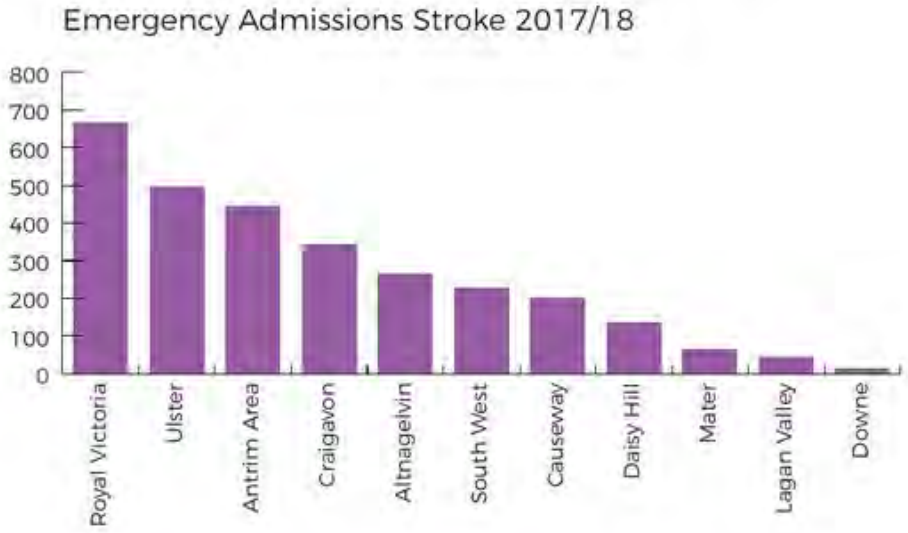
WHAT?

Stroke wards provide levels of specialist care including access to specialist nurses, physicians and allied health professionals.

WHERE?

11 locations - Antrim, Causeway, Craigavon, Daisy Hill, Altnagelvin, South West Acute, Royal Victoria, Mater, Ulster, Lagan Valley and Downe hospitals.

The number of people admitted varies widely as shown below:



Source: Hospital Information System (HSC Data Warehouse) ICD 10 codes 161-164

LEVELS OF PERFORMANCE

Only around half of people with strokes are admitted to stroke units – despite admission to a specialist unit being the single most important treatment for stroke patients.

In the period April 2017 – March 2018, only the Royal Victoria and South West Acute hospitals met the SSNAP target of ensuring that 90% of patients were admitted to a stroke unit.

Not all units meet the required standard.

Because the number of stroke patients attending each hospital is often small, patients are often admitted to care of general medical or elderly medicine consultants.

COMMITMENT TO IMPROVEMENT

COMMITMENT 4: We will reshape stroke services by 2022 to establish dedicated hyperacute and acute stroke units underpinned by regional service standards to deliver improved outcomes for stroke patients.

NON ACUTE HOSPITAL CARE

WHAT?

Provide ongoing rehabilitation, care and support with adapting to life after stroke. This applies to approximately 13% of stroke patients.

WHERE?

5 locations – Lurgan, Tyrone County, Whiteabbey, Mid Ulster and South Tyrone hospitals

LEVELS OF PERFORMANCE

The practice of providing general rehabilitation outside specialist stroke units is not supported by research or stroke clinical guidelines.

COMMITMENT TO IMPROVEMENT

COMMITMENT 4: We will reshape stroke services by 2022 to establish dedicated hyperacute and acute stroke units underpinned by regional service standards to deliver improved outcomes for stroke patients.

COMMUNITY REHABILITATION AND SUPPORT

Around two thirds of stroke survivors will require some continued support or rehabilitation in the community after discharge from hospital. Up to 40% of stroke survivors may be suitable for 'Early Supported Discharge' which replicates the specialist stroke therapy normally provided in hospital within the home environment. This should be available seven days a week. Only the Belfast and South Eastern Trusts provide access to these services at the weekend. In recognition of this, the HSC is investing an additional £1.3m in the roll out of Early Supported Discharge.

Continued support for life after stroke

Stroke rehabilitation usually begins in hospital in a stroke unit and continues after hospital discharge by either a community stroke team or an early supported discharge team.

The aim of stroke rehabilitation is to relearn skills lost after a stroke and improve the quality of life for the stroke survivor. The severity of stroke complications and each person's ability to recover vary widely. This service should be delivered by a core multidisciplinary team consisting of a doctor, nurse, physiotherapist, occupational therapist, psychologist, social worker, speech and language therapists, and other specialists/services as required eg orthoptists, orthotists, continence advice. Members of the core multidisciplinary stroke team should screen the person with stroke for a range of impairments and disabilities in order to inform and direct further assessment and treatment.

The duration of stroke rehabilitation depends on stroke severity and related complications. Some stroke survivors recover quickly but many need some form of long-term stroke rehabilitation, lasting possibly months after their stroke. Rehabilitation needs can change during recovery.

Local health and social care providers should have robust systems and processes to ensure the safe transfer and long-term care of people after stroke, including those in care homes. This should include timely exchange of information between different providers using locally agreed protocols. Patients should receive information about services provided by voluntary agencies in their localities and carers should be offered a carers assessment.

Responses to the pre-consultation were strongly in favour of the provision of support from the HSC and voluntary sector to stroke

survivors and their carers. Charities such as the Stroke Association and NI Chest Heart and Stroke provide a range of support services designed to improve the health, wellbeing and quality of life for stroke survivors. This includes My Stroke Guide, an online community providing digital support during recovery from stroke, family support services, self management programmes and carers groups.

We know, however, from research undertaken by the Stroke Association in conjunction with the Ulster University that stroke survivors feel that more rehabilitation, psychological and emotional support is required, and that the experience of moving from hospital into the community remains too often a poor one. The Stroke Association's report, 'Struggling to recover' identified some challenging findings including:

- 45% of all stroke survivors felt abandoned when they left hospital;
- 90% of stroke survivors felt that their emotional and cognitive needs were not met once they left hospital; and
- 85% of carers do not feel prepared for their loved one to come home from hospital following a stroke.

Work is already underway to improve support services. For example, the Health and Social Care Stroke Network has agreed a project focusing specifically on long term care. This will see the development of a single regional stroke support pathway for the provision of a range of support services, the identification of gaps in current service provision and the development of a single regional contract specification to reduce duplication and improve equity of access. It is intended that this work will conclude in Summer 2019. In addition, pilots are planned to deliver emotional support through a partnership between the HSC and the voluntary sector. These will be evaluated to determine their impact. But much more can be done.

COMMITMENT 5: 'Struggling to recover' makes six recommendations to improve services. Alongside the reshaping of hospital services, we are committed to driving improvement in rehabilitation and long-term support and will use the Stroke Association's analysis and recommendations as a blueprint to drive that improvement.

THE STROKE WORKFORCE

Around 350 staff are directly employed within hospital stroke services across NI. The largest groups are nursing staff, Allied Health Professionals (AHPs) and medical staff.

Hospital stroke services also link closely with many staff in other services such as: Radiology, Interventional Neuroradiology, Northern Ireland Ambulance Service, Emergency Departments and regional Neurosciences.

Consultant physicians working in stroke services in NI also provide care across general medicine and acute care of the elderly. The exception is the Royal Victoria Hospital which has dedicated stroke consultants.

There are significant challenges within the stroke workforce. Currently four hospitals have vacant consultant posts and the HSC is also experiencing a shortage of nursing and AHP staff across all services. This means that the stroke workforce is currently too thinly deployed across too many sites, in practice this leads to three key issues:

- it leaves services reliant on temporary locum or agency cover, which comes at a high cost and which would be better invested in services that are sustainable in the long term.
- Staff working on smaller sites face challenges in developing and maintaining skills with some hospitals seeing relatively small numbers of stroke admissions.
- It is proving difficult to recruit and retain junior medical staff to deliver services where they would be unlikely to get the experience they need in terms of volumes and case mix in order to maintain their skills and develop new skills.

We also know that there is a challenge in developing and maintaining skills with some hospitals seeing relatively small numbers of stroke admissions.

Furthermore, it is proving difficult to recruit and retain junior medical staff to deliver services where they would be unlikely to get the experience they need in terms of volumes and case mix in order to maintain their skills and develop new skills. The success of any new service model will be absolutely dependent on staff being employed and deployed in such a way that makes the best use of their skills and which allows them to continue to develop as professionals

while providing the services that users and patients need. The patient experience, and their perception of the quality of care they receive, depends in a very significant way on having well-trained, experienced and motivated frontline staff.

COMMITMENT 6: The HSC will undertake a workforce review to identify the staffing and skill mix required to deliver effective stroke services.

2

PART 2: RESHAPING HOSPITAL-BASED CARE

In 2012, the Regulation and Quality Improvement Authority (RQIA) carried out a review of stroke services. Overall the key findings were that stroke services in NI were too fragmented between hospital sites, many patients were not being cared for in optimal environments, and new time-critical interventions, such as thrombectomy, were not always available on a 24/7 basis. The review also highlighted the need for progression of clinical competencies and training relating to stroke and the establishment of clearly defined stroke units and dedicated stroke wards. This proved difficult to achieve and sustain in smaller hospitals where recruitment and retention of specialist staff is a recognised problem.

The Bengoa Report ('Systems not Structures: Changing Health and Social Care'), published in 2016, highlighted the Department of Health's (England) National Stroke Strategy which identified that care in a stroke unit was the single most important factor in improving patients' outcomes after stroke. Based on these findings, in 2010 acute stroke services were centralised across London. Prior to this, acute stroke services were provided in 30 hospitals. After reconfiguration, specialist care was provided in eight designated hyper acute stroke units 24/7. Evidence suggests that, following the reforms, there was a significant reduction in mortality at 3, 30 and 90 days after admission to a HASU, leading to 96 extra lives being saved per year. There was also a reduction in the length of time stroke patients spent in hospital compared to before reorganisation.

The experience in London demonstrated that, if you have a stroke, you are likely to make a better recovery and have a reduced chance of mortality if you are treated in a fully equipped specialist unit filled with experienced staff. This is more likely in a hyperacute stroke unit, even if you may have to travel further than your local hospital to get there.

Bengoa also highlighted clinical evidence which shows that patients are 25% more likely to survive or recover from stroke if treated in a specialised centre. Other benefits include:

- Improved levels of stroke care in line with National Audit (SSNAP) recommendations – appropriate staffing levels to allow early assessment, observation and early rehabilitation input.
- The highest quality medical care in hospital (more concentrated levels of specialist medical, nursing and AHP care).

- Patients being admitted to a specialist stroke unit as a ward of first admission. Latest medical evidence demonstrates that where patients are treated in specialist stroke units they achieve best outcomes.

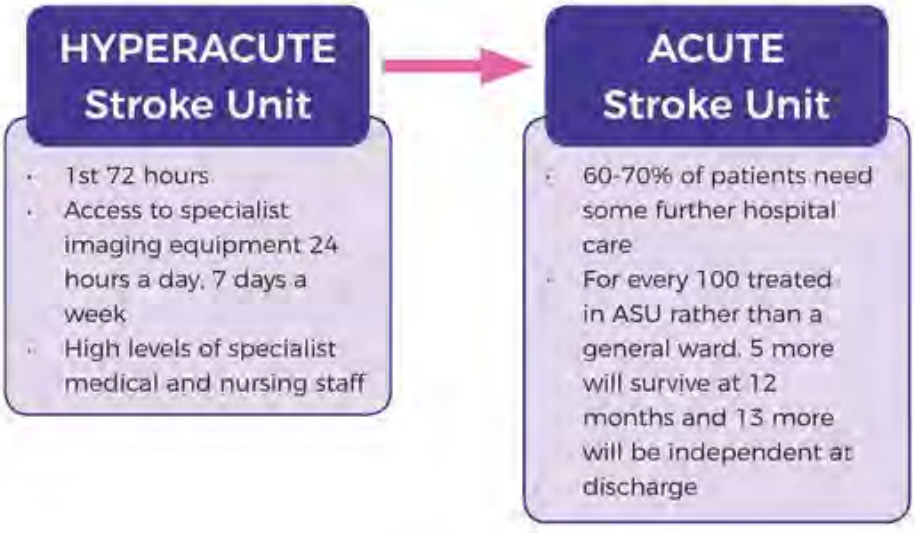
- Better rehabilitation outcomes - a specialised service which will bring community and hospital based staff together as an integrated team providing care to stroke patients. This will provide more focused care and continuity of service provision throughout the patient's pathway.

- Reduced length of stay in hospital - more focused community based rehabilitation to allow stroke patients to be discharged from hospital earlier and recover at home.

Stroke unit care can reduce death and disability but not everyone who would benefit from this care is currently receiving it. In NI, patients are not routinely admitted to this type of unit. Usually only those who receive thrombolysis or are clinically unstable on arrival, receive close monitoring in the hours after stroke. This is currently only 12.5% of strokes across NI. We also know that, despite the best efforts of staff working in a challenging environment, the performance of stroke services falls below the level we would like to provide and which patients have a right to expect.

We want to reshape and improve hospital-based stroke services, focusing on improved outcomes by delivering the best possible treatment at the earliest opportunity.

Building on best practice guidelines and standards, we believe that the best way to improve outcomes for the majority of people who have strokes is through the establishment of Hyperacute Stroke Units (HASUs) and Acute Stroke Units (ASUs). This model is outlined below:



Hyperacute Stroke Units (HASUs)

The Royal College of Physicians and the NICE Stroke Guidelines recommend that every stroke patient should be closely monitored for the first few days in a hyperacute stroke unit. The absence of a hyperacute stroke model in NI means that access to this level of treatment varies significantly depending on geographical location and time of day. In NI, less than 40% of people who have strokes have access to this level of care.

A hyperacute stroke unit requires more intensive nursing, AHP and medical care than in an acute stroke unit. Under the proposals in this document the following infrastructure will be the minimum required at any future location throughout NI to deliver hyperacute stroke unit care:

- Consultant-led Emergency Departments operational 24 hours a day, seven days a week.
- Deliver all the investigations that a patient requires 24 hours a day, seven days a week.
- Highly skilled stroke multi-disciplinary team including clinical nurse consultants, advanced nurse practitioners, AHPs, specialist nurses, and senior nurse decision makers 24 hours a day.
- Potential to deliver a stroke consultant assessment 24 hours a day, seven days a week with a minimum of a six consultants rota.
- Deliver rapid emergency stroke protocols in the Emergency Department with direct admission to a hyperacute stroke unit or rapid transfer to the Royal Victoria Hospital for further assessment for Thrombectomy when required.

Following hyperacute care, around 40% of patients should be discharged home to community stroke services. The remaining 60% of patients would continue to receive care in an ASU. In Manchester, the reconfiguration of stroke services led to a significant reduction in length of hospital stay by 2 days.

Acute Stroke Units (ASUs)

An acute stroke unit is where hospital care and rehabilitation is provided by a specialist team until a person is ready to be discharged home. This usually commences around the third day. Rehabilitation services are currently delivered in subacute hospitals such as Lurgan, Whiteabbey, and Tyrone County hospitals. However, the proposals in this document envisage that in future all stroke specific rehabilitation would be delivered within specialist acute stroke units.

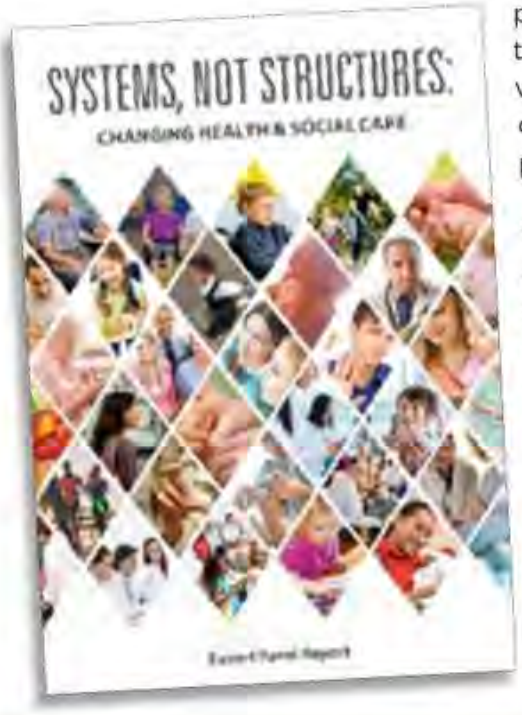
Although not an acute stroke unit, it is planned that the Regional Acquired Brian Injury Unit at Musgrave Park Hospital will continue in future to have a very important role in delivering specialist rehabilitation to the small group of complex stroke patients whose needs are best met within that environment.

We know from the evidence elsewhere that this approach works. Approximately 100 lives a year have been saved since changes to the way stroke services are organised in London were introduced. Manchester has implemented similar changes with positive results, particularly in reducing the number of days patients need to stay in hospital recovering from a stroke.

Impact of centralising acute stroke services in English metripolitan areas on mortality and length of hospital stay: difference-in-differences analysis. Morris et al (2014). BMJ

Workforce Development

In delivering a new model of stroke care, it will of course be absolutely critical to ensure that the workforce is in place to deliver it. The Bengoa Review revealed that the demands facing the current service model, for most specialties, covering community, primary and secondary care services, are putting severe pressures on the workforce. This includes stroke services. This is not fair to the people who use our services, nor is it fair to the HSC staff who deliver them. Resolving this is not about money, it is about creating an environment in which staff are enabled and empowered to do the jobs they have been trained to do in a way that meets patients' needs. As the evidence above demonstrates, the current stroke model has the patients in the wrong place and at the wrong time; this brings organisational de-motivation as staff feel unable to provide the highest quality of care to those they serve.



The Department therefore recognises that delivering the proposed new model will require significant change for a workforce which is already overstretched and under pressure. If the proposals in this document are approved, following consultation, a detailed workforce implementation plan will be produced to align the deployment of the current available stroke workforce with the new model and to better target investment in workforce to optimise the full potential of the proposed new model, subject to available resources.

VISION & DEVELOPING OPTIONS

VISION

The Department's vision is that by reshaping stroke services, Health and Social Care in NI, will:

- By 2022, establish a regionally integrated network of Hyperacute Stroke Units, Acute Stroke Units and Community Rehabilitation Services; and
- By 2024, 95% of people with a stroke will be treated in a HASU.

DEVELOPING OPTIONS

The University of Exeter was commissioned to provide independent support and assurance for the identification of options for providing hyperacute stroke unit care.

This work utilised five years of data relating to stroke services in NI from hospital admissions and ambulance calls. A computer programme was developed which calculated the re-distribution of patients, the number of disability free outcomes, likely sustainability and population travel times.

All of the options considered in this document offer significantly improved outcomes compared with the way services are currently provided in hospitals.

Taking into account best practice and guidance, the analysis for each option considers the sustainability of the service and the impact on travel times.

Sustainability

Guidance from the Royal College of Physicians recommends that HASU's should ideally admit more than 600 stroke admissions per year.[1] This number is suggested as the minimum size to attract a large cohort of specialist staff and sustain specialist rotas 24 hours a day, seven days a week. The only unit in NI currently admitting more than 600 stroke patients is the Royal Victoria hospital in Belfast. Under the options below, many of the units would still have admissions lower than 600, although this should also be considered in the context of an ageing population and an expected increase in the number of people experiencing strokes over time.

Guidance also recommends that once admissions exceed 1500 this presents an operational challenge and should be carefully managed.

1 Royal College of Physicians Guidelines for Stroke, 5th Edition (2016) https://www.strokeaudit.org/SupportFiles/Documents/Guidelines/2016-National-Clinical-Guideline-for-Stroke-5t-(1).aspx

Evidence also suggests that redirecting patients to larger stroke centres improves thrombolysis rates. High-volume centres have been associated with better adherence to guidelines and this has been associated with both improved stroke outcome and higher patient satisfaction.[2]

2 Birmingham, Solihull and the Black Country stroke redesign literature review. Appendix 14 Stroke Services Configuration Decision Support Guide (NHS)

Travel time

Reconfiguration of stroke services in London suggested targets for travel times of between 30 minutes and 60 minutes for the journey time from home to hyperacute stroke unit for treatment with thrombolysis. However, for a more dispersed urban/rural population such as NI, it is expected that travel times may be longer in some areas. The modelling therefore considered travel further than 60 minutes by road ambulance transport to a HASU.

The reshaping options in this document will mean longer travel time for some people compared with the current model of services. However, evidence from reconfiguration elsewhere demonstrates that patients who are treated in a HASU have better outcomes because they get a faster diagnosis and specialist treatment even if the journey to hospital is longer. It is also true that time spent travelling to hospital accounts for only a small proportion of the time between onset of stroke symptoms and hospital treatment. Stroke patients often take several hours to alert emergency services of their symptoms and often delays are experienced after arrival at hospital. These reforms would mean that patients are taken faster to the services they need in order to make the best possible recovery.

Nevertheless, we recognise that increased travel times are a source of anxiety and are considering a range of options to minimise travel time within the new model of care. This includes the potential expansion of the Helicopter Emergency Medical Service (HEMS) and the development of a new Clinical Response Model for the NI Ambulance Service. We consider these below.

MEASURES TO ADDRESS TRAVEL TIME

A Helicopter Emergency Medical Service (HEMS) facilitates emergency medical assistance where immediate and rapid transportation is essential by carrying medical personnel and/or medical supplies and/or ill or injured persons and other persons directly involved.

An **air ambulance** is where the aircraft is an extension of the Ambulance Service's land vehicles for the transfer of people from/to hospital.

The charity partnership to provide the HEMS service was introduced in NI in 2017. The service is currently targeted at what is known as 'primary response' incidents where medical personnel is transported direct to the scene of an incident and rapid transport is provided to transfer an unstable casualty to the nearest appropriate hospital.

The Department proposes to expand the partnership with the charity Air Ambulance NI (AANI) to enable the HEMS to provide a 'secondary response' to incidents where the aircraft would be dispatched to a designated site to meet a road ambulance coming either from an incident or from a hospital in order to provide rapid onward transport of the patient by helicopter to a hospital. Providing a service to both primary and secondary response incidents was strongly supported by respondees to a public consultation on the establishment of the HEMS with 96% in favour of this approach.

The Northern Ireland Ambulance service plays a central role in ensuring that those with the most serious, life-threatening conditions get the most timely and appropriate response. As well as planned investment in the ambulance fleet and frontline staff, the Northern Ireland Ambulance Service has recently consulted on a new Clinical Response Model, similar to those introduced in recent years elsewhere in the UK. The new model is designed to provide a more clinically appropriate ambulance response than the current approach by better targeting the right resources (clinical skills and vehicle type) to the right patients.

The adoption of this new model is expected to realise a range of benefits for patients including:

- Reducing the proportion of patients receiving the highest level of response from circa 30% to a more appropriate 7%. This will allow resources to be focussed on improving the response to those patients identified as genuinely having an immediately life threatening condition;
- Identifying Category 1 patients earlier than is currently the case and allocating a resource more quickly than at present;

- Improving efficiency by reducing the deployment of multiple resources to incidents where the patient's condition does not warrant that level of response;

- More effective targeting of the right resource, first time to meet the patient's needs.

The new model should lead to improvements in the time patients with conditions such as Stroke and Heart Attack reach definitive care in specialist units. For example, for a patient with a suspected stroke the aim of the response will be to deliver them directly to a specifically identified centre of care i.e. a hospital with hyperacute stroke services, in as short a time as possible, thereby increasing the chances of receiving treatment aimed at reversing the effects of a stroke and increasing the likelihood of a better recovery.

In England, during the trials on a similar model, it was found that stroke patients were arriving in specialist centres sooner than under previous arrangements despite the initial ambulance response taking longer to arrive.

We also recognise that increasing travel time has an impact on the family, friends and carers of people who had a stroke. However, we believe that the benefits of reducing deaths and long-term disability caused by strokes outweighs the short-term impact for people visiting stroke patients in hospitals.

COMMITMENT 7: We will extend the partnership with the charity AANI to enable the Helicopter Emergency Medical Service (HEMS) to provide a secondary response to incidents including strokes by 2022 to improve access to services, particularly from rural areas.

THE OPTIONS

We have identified six options to reshape hospital-based care based on the establishment of Hyperacute Stroke Units (HASUs) and Acute Stroke Units (ASUs). These are summarised in the table below before being considered in more detail.

Option	Configuration	HASU sites	ASU sites
A	5 HASUs	Royal Victoria, Craigavon, Altnagelvin, Antrim, South West	Royal Victoria, Craigavon, Altnagelvin, Antrim, South West
B	4 HASUs	Royal Victoria, Craigavon, Altnagelvin, Antrim.	Royal Victoria, Craigavon, Altnagelvin, Antrim (Possible 5th ASU at Ulster)
C	4 HASUs	Royal Victoria, Craigavon, Altnagelvin, South West	Royal Victoria, Craigavon, Altnagelvin, South West (Possible 5th ASU at Ulster)
D	Phased approach		
	Stage 1: 4 HASUs	Royal Victoria, Craigavon, Altnagelvin, Antrim	Royal Victoria, Craigavon, Altnagelvin, Antrim (Possible 5th ASU at Ulster)
	Stage 2: 3 HASUs	Royal Victoria, Craigavon, Altnagelvin	Royal Victoria, Craigavon, Altnagelvin, Antrim (Possible 5th ASU at Ulster)
E	Phased approach		
	Stage 1: 4 HASUs	Royal Victoria, Craigavon, Altnagelvin, South West	Royal Victoria, Craigavon, Altnagelvin, Antrim (Possible 5th ASU at Ulster)
	Stage 2: 3 HASUs	Royal Victoria, Craigavon, Altnagelvin	Royal Victoria, Craigavon, Altnagelvin, Antrim (Possible 5th ASU at Ulster)
F	3 HASUs	Royal Victoria, Craigavon, Altnagelvin	Royal Victoria, Craigavon, Altnagelvin, Antrim (Possible 5th ASU at Ulster)

CURRENT SERVICE

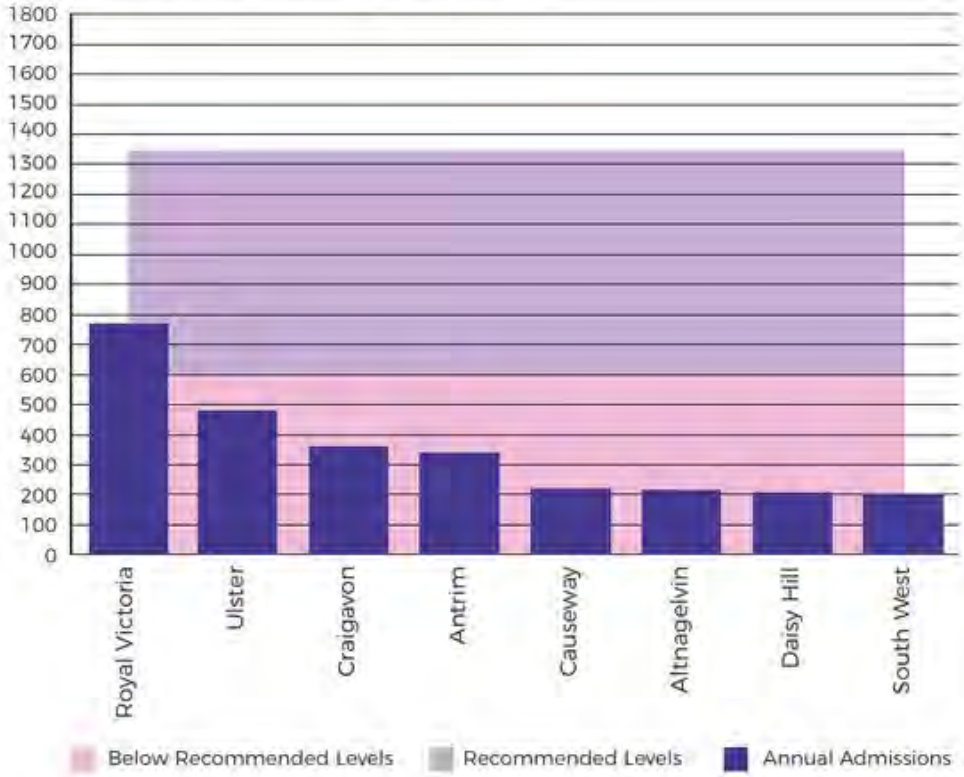
BASELINE: Thrombolysis-providing units at Royal Victoria, Ulster, Daisy Hill, Antrim, Altnagelvin, Causeway, Craigavon and South West hospitals

Sustainability

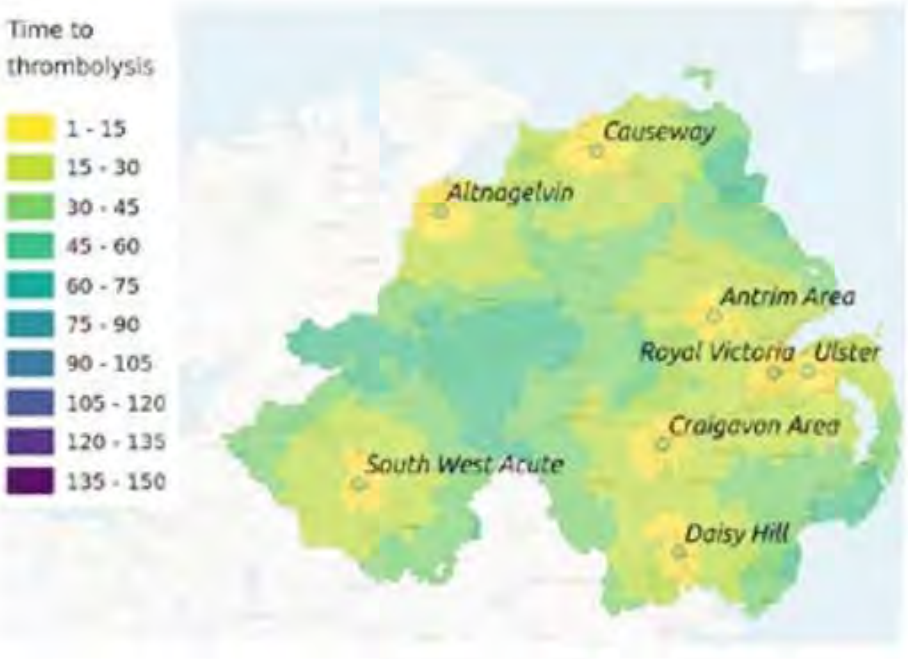
As outlined previously in this document, current services are not sustainable, with seven out of eight hospital sites having estimated annual admissions below the recommended levels. This may mean that staff at those hospitals do not have the opportunity needed to build and maintain relevant skills, and that consequently people attending those hospitals are not receiving the best possible treatment.

Having this many sites also means that the deployment of the current workforce is very stretched. For example, there is a shortage of consultants at more than half of the current sites.

Estimated Annual Admissions



Travel time



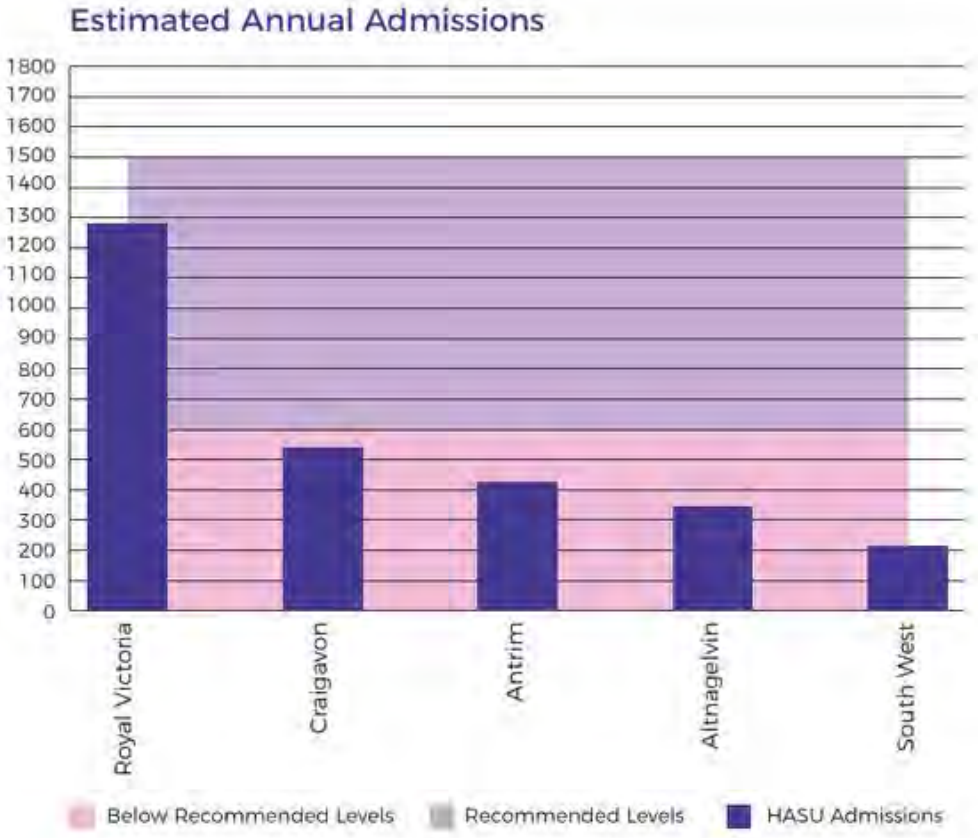
With eight sites, travel time falls within 60 minutes. However, travel time alone is not sufficient to deliver better outcomes. It is more important that patients are taken as quickly as possible to the place where they will receive the best care. All of the reconfiguration options discussed in this document offer significantly improved outcomes over this current configuration despite longer travel times.

OPTION A: Hyperacute stroke units at Altnagelvin, Antrim, Craigavon, Royal Victoria and South West Acute hospitals. Acute stroke units co-located.

Sustainability

As outlined in the diagram below, four of the five HASU sites within this configuration have admission levels which fall below the recommended minimum level. This poses a potential risk to the sustainability of improved outcomes with staff potentially unable to get the experience they need to develop and maintain their specialist skills.

We recognise that the South West Acute Hospital (SWAH) performs well against standards and has a relatively small number of annual admissions. The performance of other hospitals with smaller levels of admissions would suggest that the SWAH's performance is not one which can be easily replicated elsewhere. In looking at how services are provide in the future, we need to look at the sustainability not just of individual sites, but of our network of services as a whole.



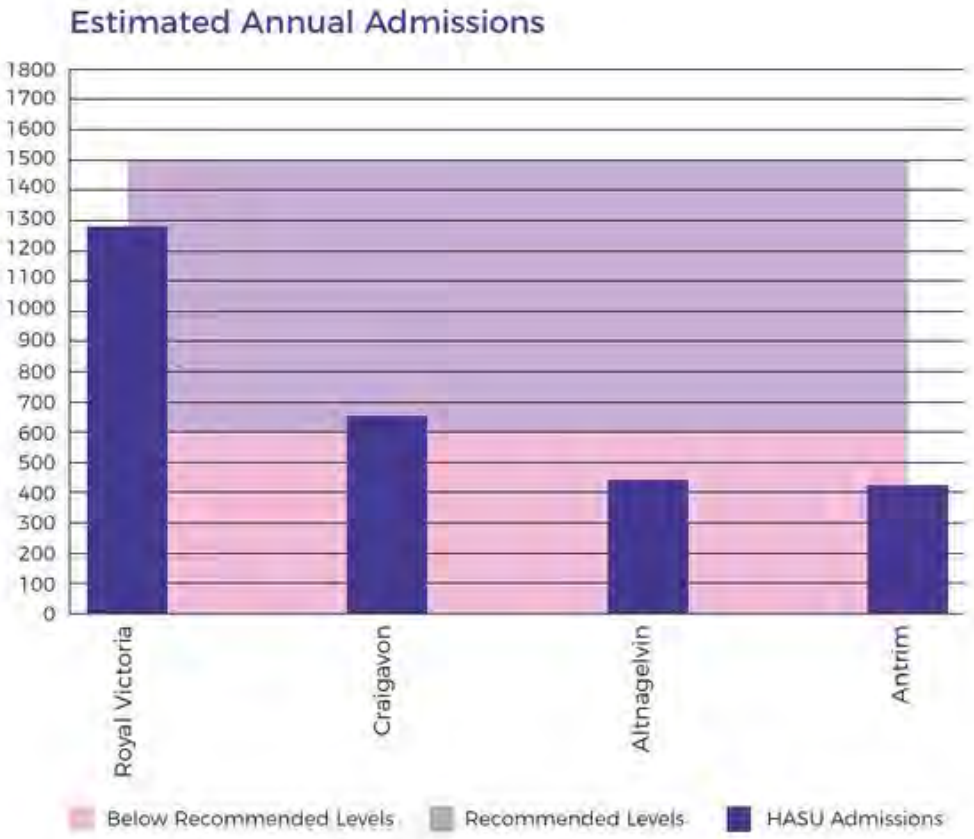
Travel time

This option performs well on travel times, with 99% of the population having a travel time to one of the HASU sites of 60 minutes or less and a maximum travel time of 66 minutes.

OPTION B: Hyperacute stroke units at Altnagelvin, Royal Victoria, Craigavon and Antrim hospitals. Acute stroke units to be co-located, with consideration of a fifth ASU at the Ulster hospital.

Sustainability

As outlined in the diagram below, both Antrim and Altnagelvin hospitals would have admission levels falling below the recommended level. This could mean that staff at these hospitals do not get the experience they need to build and maintain their expertise. This, in turn, may have a negative impact on patient outcomes with patients not receiving the right treatment in as timely a fashion as a hospital with higher levels of admission and therefore experience.



Travel time

Under this option, 94% of the population are within a 60 minute travel time to one of the HASU sites. A relatively small proportion of the population would, however, see travel times in excess of 60 minutes, with a maximum travel time of 106 minutes.

In this context, the availability of an air ambulance for stroke patients is an important consideration in considering the potential to address excess travel time for those affected.

OPTION C: Hyperacute stroke units at Royal Victoria, Altnagelvin, Craigavon and South West hospitals. Acute stroke units (ASUs) co-located with consideration of a fifth ASU at the Ulster hospital.

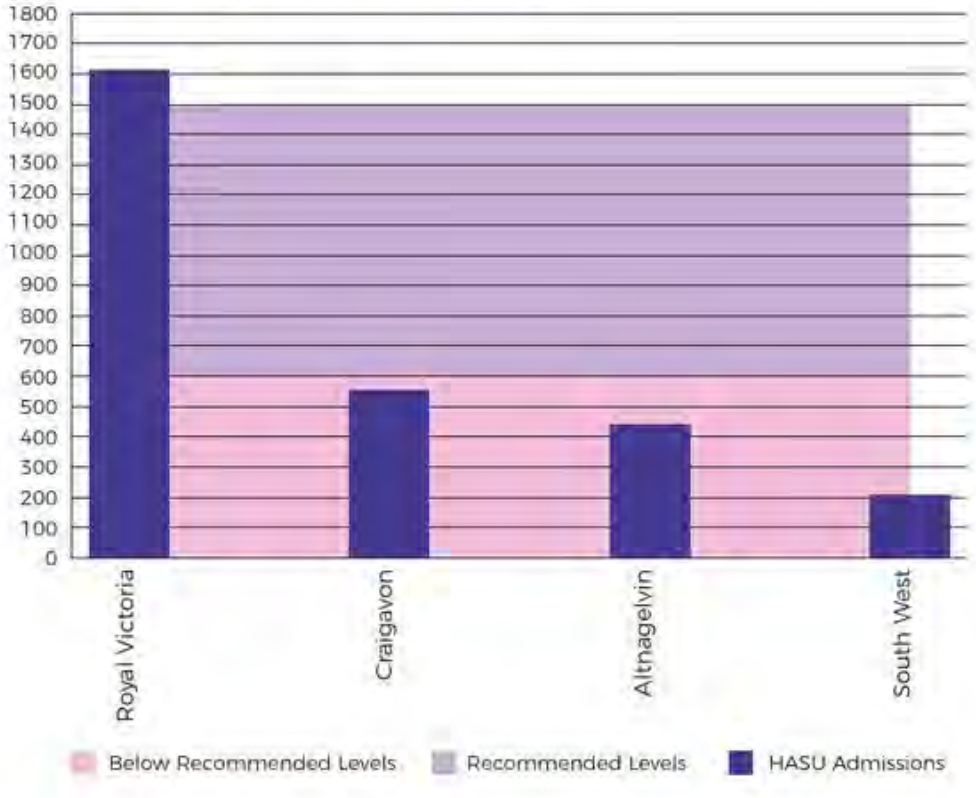
Sustainability

As outlined below, none of the HASU sites have admission levels within the recommended levels. A HASU at the Royal Victoria would see admissions of 1,613, above the recommended maximum of 1,500. It is likely that additional measures would be needed to ensure that sufficient capacity and staffing was in place to ensure a resilient service to meet this demand.

HASUs at Craigavon, Altnagelvin and South West Acute hospitals would have admissions which fall below the recommended level. This may mean that staff in those hospitals do not have the opportunity needed to build and maintain their specialist expertise which, in turn, may have a negative impact on patient outcomes with patients not receiving the right treatment in as timely a fashion as a hospital with higher levels of admission.

However, we recognise that the South West Acute Hospital (SWAH) performs well against standards and has a relatively small number of annual admissions. The performance of other hospitals with smaller

Estimated Annual Admissions



levels of admissions would suggest that the SWAH's performance is not necessarily one which can be easily sustained or replicated elsewhere. In looking at how services are provided in the future, we need to look at the sustainability not just of individual sites, but of our network of services as a whole.

Travel time

This option performs relatively well on travel times with 98% of the population living within a 60 minute travel time to one of the HASU sites. The maximum travel time is 75 minutes. As with option one, we need to consider this performance in the context of the impact measures such as an air ambulance could have on travel times within other configurations which may offer a more sustainable platform for improved outcomes.

OPTION D: Hyperacute stroke units at Royal Victoria, Altnagelvin, Craigavon and Antrim hospitals with services removed from Antrim Hospital over time.

Sustainability

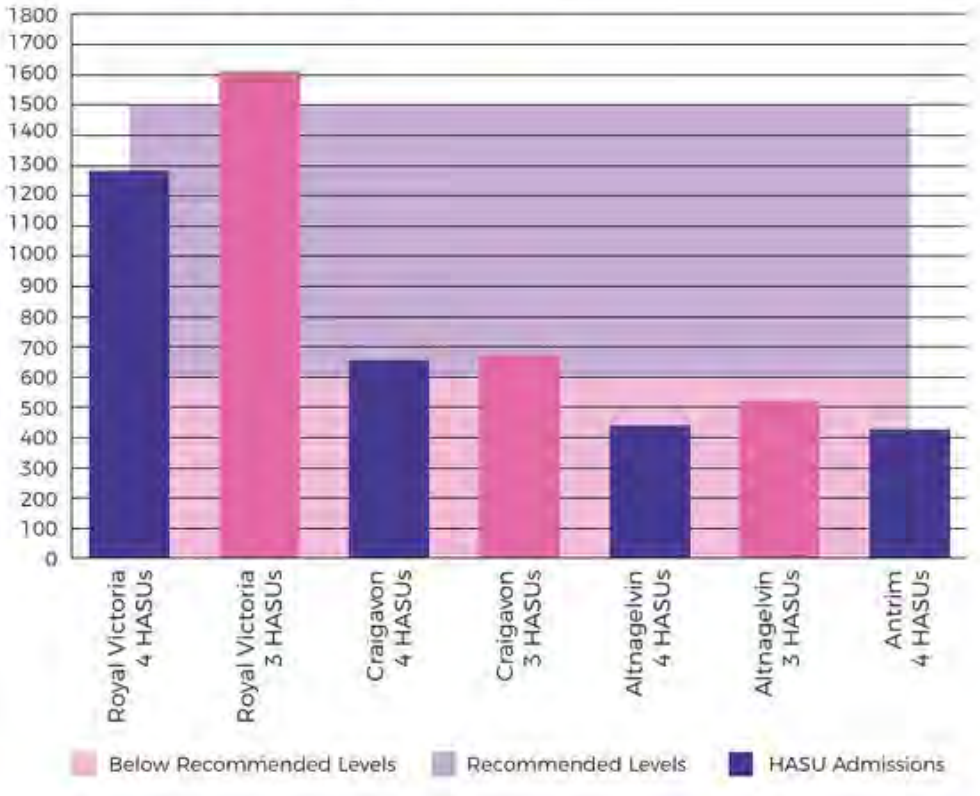
As outlined in more detail under option B, the main issues with the initial four HASU model are admissions levels falling below recommended levels at two of the four sites, with a potential impact on the opportunity available to staff on those sites to develop and maintain specialist skills.

The main issues for a 3 HASU model, as outlined in more detail under option F, are that admissions at Royal Victoria would be above the recommended level.

The main strength of the phased approach within this option is the additional flexibility it offers in allowing time to maximise capacity at the Royal Victoria site to cope with 1,600 admissions, while ensuring that people have access to high quality, sustainable stroke services in the interim.

With services withdrawn from the Antrim site, Altnagelvin sees a significant increase in admission levels which increase from 434 to 520, bringing Altnagelvin closer to the recommended level of admissions.

Estimated Annual Admissions

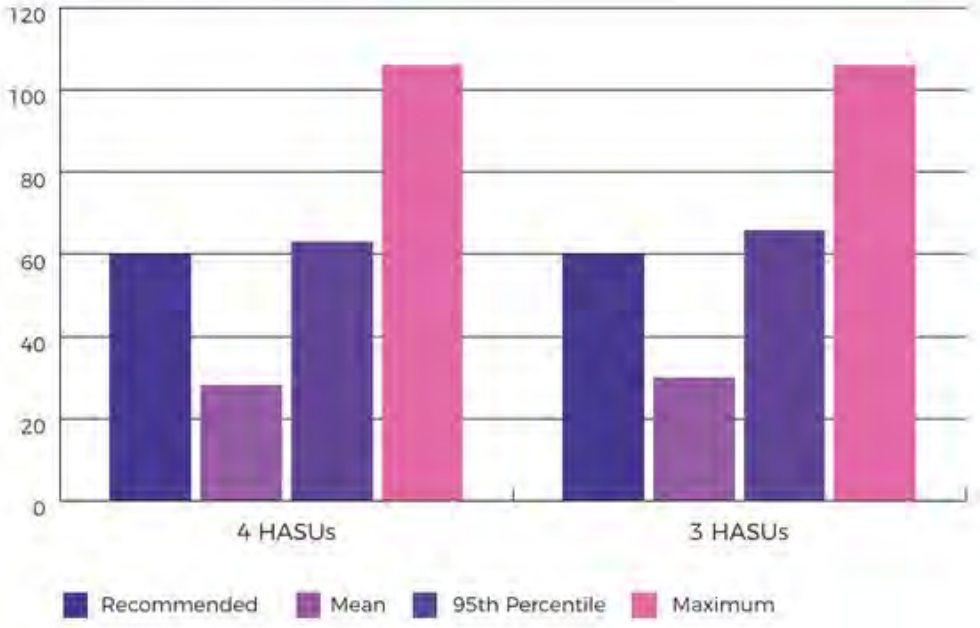


Travel time

Under this phased approach, 94% of the population lives within 60 minutes of one the four HASU sites. This is reduced to 93% when the HASU sites are reduced to three.

As outlined in the chart below, travel times are only marginally affected by this phased approach.

Estimated Travel Time



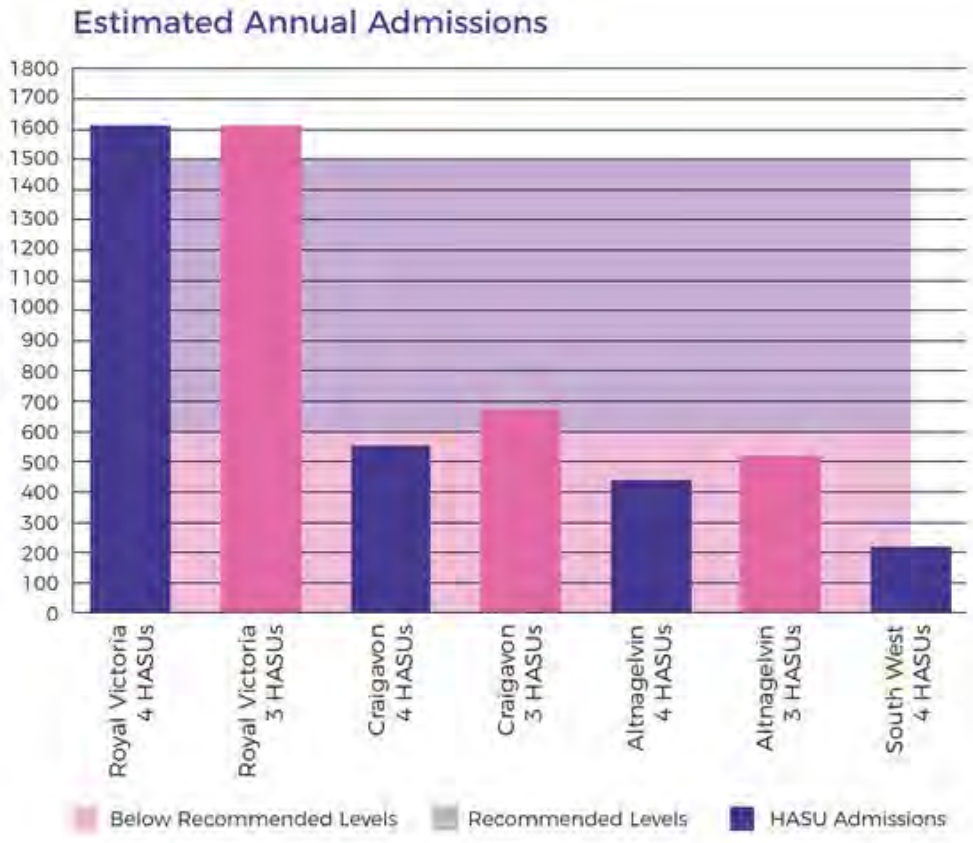
OPTION E: Hyperacute stroke units at Royal Victoria, Altnagelvin, Craigavon and South West Acute hospitals with services removed from the South West Acute Hospital over time.

Sustainability

As outlined in more detail under option C, the main issue for this 4 HASU model is that none of the four sites have admissions levels within recommended levels.

Subsequently reducing to three HASUs results in increased admissions to both Craigavon (which then falls within the recommended levels) and Altnagelvin which nonetheless continues to fall below the minimum recommended level.

The phased approach within this option has no impact on the Royal Victoria which sees admission levels of 1,613 under both the four and three HASU configuration. This phased approach does not allow for additional time to maximise capacity on the Royal Victoria site as the presence of a HASU at the South West Acute Hospital has no impact on admissions at Royal Victoria.

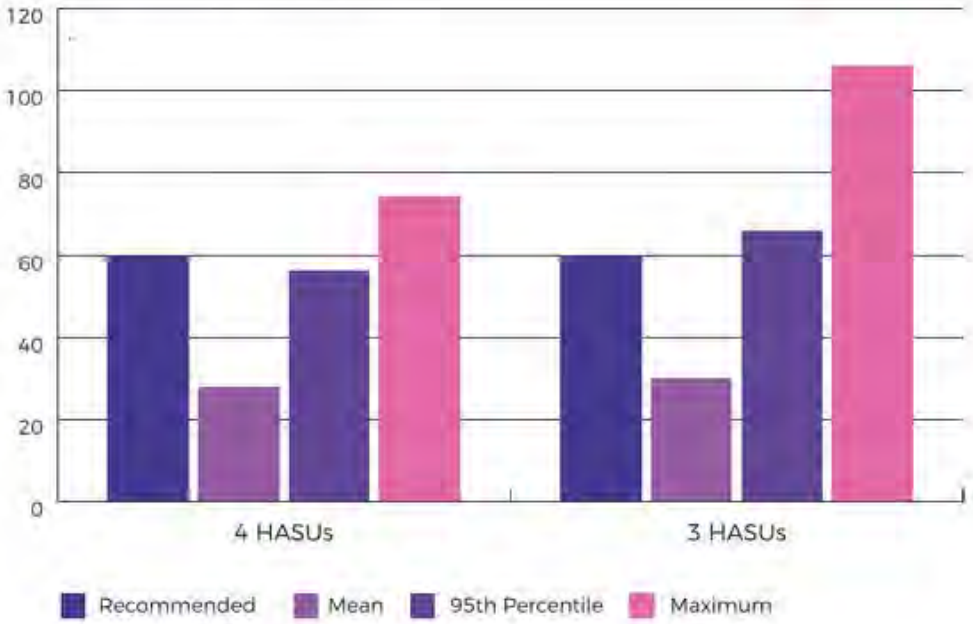


Travel time

Under this phased approach the percentage of the population living within 60 minutes of a HASU falls from 98% with four HASUs to 93% with three HASUs. Maximum travel time increases from 75 minutes to 106 minutes.

In this context, the availability of an air ambulance for stroke patients is an important consideration in considering the potential to address excess travel time for those affected.

Estimated Travel Time



OPTION F: Hyperacute stroke units at Royal Victoria, Altnagelvin and Craigavon hospitals. Acute stroke units co-located with additional ASUs at Ulster and Antrim hospitals.

Sustainability

This option sees two of the three HASU sites with estimated admission levels which fall outside the recommended level.

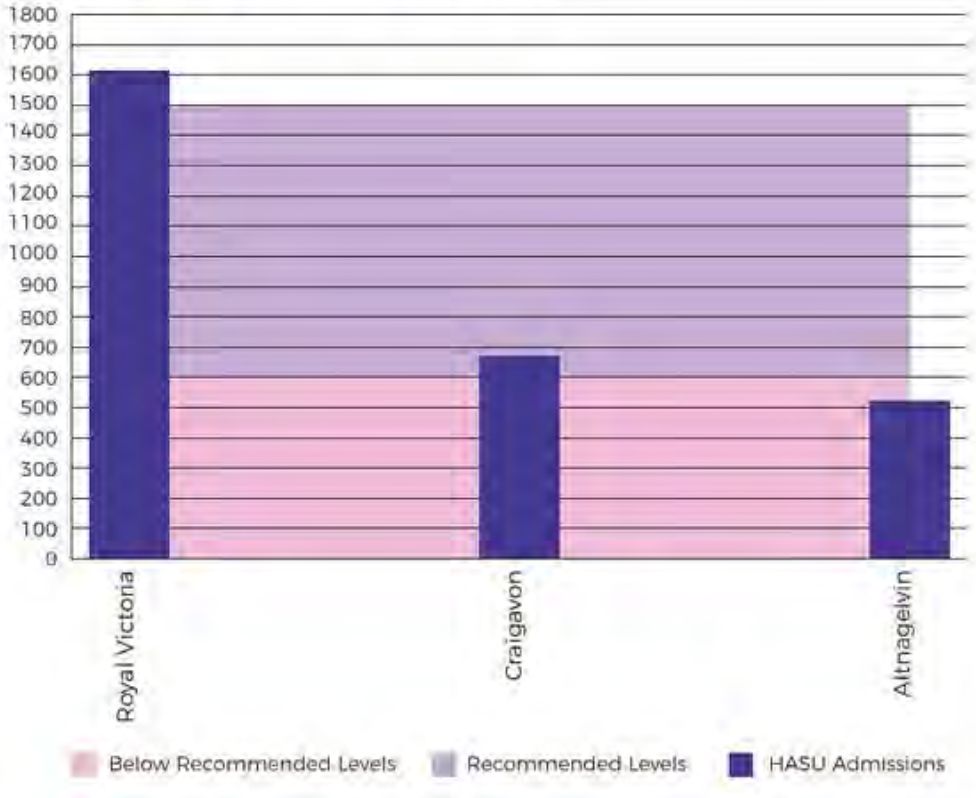
Altnagelvin would see 520 admissions, just below the recommended minimum level, while the Royal Victoria would see 1,613 admissions, just above the recommended maximum level.

However, while falling beneath the recommended minimum level, Altnagelvin would see its highest level of admissions under this option, suggesting that this is the best option for maintaining a sustainable service on the Altnagelvin site.

It is recognised that while the volume of admissions at Royal Victoria would provide a strong opportunity for the development and maintenance of specialist expertise additional measures may be required to support staff at the Royal Victoria to ensure that the levels of admission did not become overwhelming and reduce the potential for improved outcomes.

It is also recognised that the delivery of this option is dependent on the necessary capacity being secured on the Royal Victoria site.

Estimated Annual Admissions



Travel time

This option is the poorest performing option in terms of travel time, with 93% of the population living within 60 minutes of one of the three HASU sites. The maximum travel time is almost 120 minutes.

In this context, the availability of an air ambulance for stroke patients is an important consideration in considering the potential to address excess travel time for those affected.

ABOUT THESE OPTIONS:

Establishing a network of HASUs and ASUs will have an impact on other services discussed in this document. This will include existing stroke wards and non-acute hospital wards currently providing rehabilitation and support.

The order is not a ranking and we are not identifying a preferred option until we have fully considered your views and feedback alongside the available evidence.

Change will not happen overnight: the final model will be implemented in a phased approach over 24 months, reflecting the complexities and co-dependences with other services required to ensure effective stroke services.

None of these options are about saving money; all of these reconfiguration options will see significant additional investment in stroke services.

Equality Screening

In accordance with guidance produced by the Equality Commission for NI and in keeping with Section 75 of the NI Act 1998, the proposed options have been equality screened and a preliminary decision has been taken that a full equality impact assessment is not required at this stage. The preliminary decision is subject to change following analysis of feedback received during the consultation.

Rural Proofing

Rural proofing is a process that aims to make sure that Government policies are carefully and objectively examined to make sure they treat those in rural areas fairly and to make public services available in a fair way, no matter where people live in NI. Where necessary, policy adjustments might be made to reflect rural needs and in particular to ensure that as far as possible public services are accessible on a fair basis to the rural community. Throughout the consultation process, careful consideration will be given to the needs of rural communities.

Regulatory Impact Assessment

Any requirement for a Regulatory Impact Assessment will be revisited when there is more clarity on a preferred option as an outcome of this consultation exercise.

GET INVOLVED

You can share your views on reshaping stroke services in a number of ways. Our website www.health-ni.gov.uk/consultations/reshaping-stroke-care provides full details of the consultation, including panel meetings and ways to get in touch.

You can send in your answers to the questions in this consultation paper, and comments on the issues, either by post or by email, to:

Reshaping Stroke Services
Department of Health
Annexe 3
Castle Buildings
Stormont Estate
Belfast BT4 3SQ

Email: StrokeConsultation@health-ni.gov.uk
Telephone: 028 9076 5643

A separate questionnaire is available to help you to record your comments and views, and can be downloaded on the Department's website

You can also respond to the issues using our online questionnaire, which can be accessed at the following website.

Or you can also request a meeting with a panel of experts in your local area to ask questions about the proposals and share your views in person. Further details of events in your area are available here.

This document is also available in alternative formats on request. Please contact the Department, at the address above or by phoning 028 9076 5643, to make your request.

The consultation closes at 5pm on 19th July.

SUMMARY OF QUESTIONS

Questions

1. Do you agree that stroke patients should be admitted as soon as possible to specialist centres to deliver the best possible outcomes?

2. Do you agree that, to deliver an effective service, staff need the opportunity to build and develop their specialist expertise?

3. Do you agree that delivering better outcomes should take priority over additional travel time?

4. Would the availability of additional measures such as the availability of an air ambulance address your concerns about additional travel time?

5. Which of the options do you think delivers the maximum benefit for stroke patients in NI?

6. Are there additional options that we have not considered?

CONFIDENTIALITY AND ACCESS TO INFORMATION

The Department may publish a summary of responses following completion of the consultation process. Your response, and all other responses to the consultation, may be published or disclosed on request in accordance with information legislation; these chiefly being the Freedom of Information Act 2000 (FOIA), the Environmental Information Regulations 2004 (EIR), the Data Protection Act 2018 (DPA) and the General Data Protection Regulation (GDPR) (EU) 2016/679. The Department can only refuse to disclose information in exceptional circumstances. Before you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The FOIA gives the public a right of access to any information held by a public authority, namely, the Department in this case. This right of access to information includes information provided in response to a consultation. The Department cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential.

If you do not wish information about your identity to be made public please include an explanation in your response. Being transparent and providing accessible information to individuals about how we may use personal data is a key element of the DPA and the General Data Protection Regulation (EU) 2016/679. The Department is committed to building trust and confidence in our ability to process personal information. This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances.

For further information about confidentiality of responses please contact the Information Commissioner's Office on **0303 123 1113** or via https://ico.org.uk/global/contact-us/

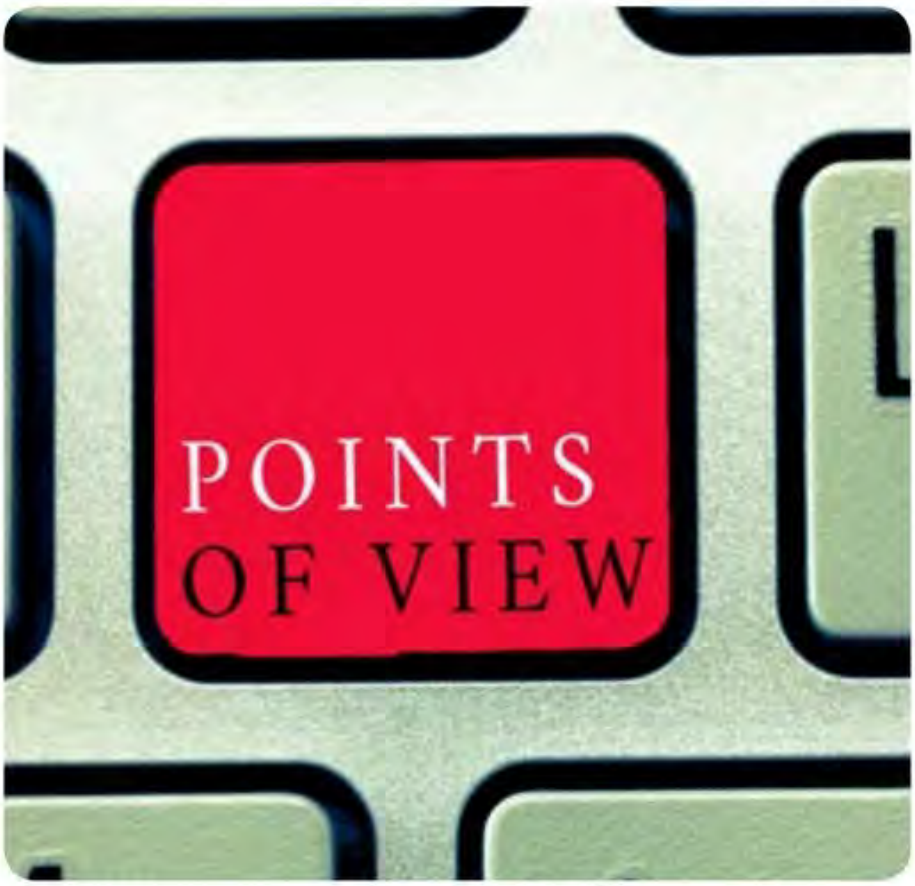
NB. Please note that the Department is unable to respond individually to responses; however, a summary of all consultation responses will be published after the close of the consultation period.

NEXT STEPS

Following the public consultation, a consultation analysis report will be prepared to inform the identification of a preferred option.

This preferred option will then be subject to an Equality Impact Assessment alongside further consideration of the impact on rural communities.

Implementation of the preferred model is subject to the development and approval of relevant business cases.



Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Consultation on Reshaping Breast Screening Services
Reporting Officer (Including Job Title):	Eoin Devlin Assistant Director Health and Wellbeing
Contact Officer (Including Job Title):	Eoin Devlin Assistant Director Health and Wellbeing

For decision	**X**	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to return the attached consultation response to the Department of Health
1.2	**Background** The Department of Health is currently consulting on proposals to reorganise Breast Screening Services in Northern Ireland. This will involve such services being removed from their current location in the Southern Trust Area at Craigavon Hospital.
2.0	**Key issues**
2.1	The Ministerial standard is that people referred with suspected breast cancer should be seen and assessed within 14 days, however the way breast assessment services are currently delivered across five Trusts has been increasingly struggling to meet this, with women waiting longer than 14 days to be seen and assessed. There is a strong clinical consensus supporting the view that the current service provision is no longer sustainable. And while the Health Service could try to persevere with the current arrangements for breast assessment they advise that maintaining a struggling system and hoping it will all hold together a little while longer would potentially provide an increasingly vulnerable level of service. This public consultation sets out firm proposals for the future. The aim is to establish a model of care which will provide high quality, safe, sustainable, accessible and timely services. This is achievable with a modest level of consolidation – concentrating provision on three locations that will serve the whole of Northern Ireland. These issues are not unique to Northern Ireland, and others are also in the process of reviewing how best to organise and deliver services across the UK. Research carried out by independent experts commissioned by the Department indicates that services which have reorganised into larger centres, catering to greater numbers of patients, deliver more resilient and reliable services as they have greater numbers of personnel. There is evidence that small services have specific problems with insufficient key personnel and consequently often deliver poorer results than larger units. While there will be no change to the breast screening service currently provided by the static and mobile units provided across all five Trust areas, the proposed changes to breast assessment services will, for some people, mean additional journey times.

	Adoption of these proposals will mean that Breast Screening will no longer be available at Craigavon Area Hospital and will add to the difficulties of our rural communities in accessing services
3.0	**Recommendations**
3.1	**That the Committee agree to return the attached Consultation response to the Department for Health**
4.0	**Resource implications**
4.1	None
5.0	**Equality and good relations implications**
5.1	No equality impact assessment is required at this time
6.0	**Rural Proofing implications**
6.1	Officers confirm due regard to rural needs has been considered;
7.0	**Appendices**
7.1	Appendix 1: Updated-bas-consultation-document Appendix 1: Bas-consultation-questionnaire
8.0	**Background Documents**
8.1	None

Department of Health
An Roinn Sláinte
Männystrie O Poustie
www.health-ni.gov.uk

ANNEX A

Consultation Questionnaire

RESHAPING BREAST ASSESSMENT SERVICES

Proposals for the Future Model of Breast Assessment Services for the Population of Northern Ireland

25 March 2019 – 19 July 2019

CONSULTATION RECOMMENDATIONS AND QUESTIONS

Recommendation 1: A regional Breast Assessment Network will be established by December 2019 to oversee implementation and ongoing delivery of the future model of Breast Assessment Services, to include all Trusts, commissioners and services working together to shape and support service provision for the population of Northern Ireland.

Question 1: Do you agree that a Breast Assessment Network should be established as part of the future service delivery model?

Recommendation 2: Breast Assessment Services for the population of Northern Ireland will be provided in no more than three locations by December 2020.

Question 2: Do you agree that Breast Assessment Services should be provided in no more than three locations?

Recommendation 3: The three breast assessment locations will comprise:

- **Altnagelvin Area Hospital**
- **Antrim Area Hospital**
- **Greater Belfast (likely to be the Ulster Hospital subject to the development of appropriate patient pathways).**

Question 3: Do you agree with the proposal to consolidate service delivery at these three locations?

Recommendation 4: Patient referrals to Breast Assessment Services in Northern Ireland will be managed through a central booking system by December 2020.

Question 4: Do you agree that patient referrals to Breast Assessment Services should be managed through central booking system?

RESPONDING TO THE CONSULTATION

You can share your views on Breast Assessment Services in a number of ways.

Our website https://www.health-ni.gov.uk/consultations/reshaping-breast-assessment-services provides full details of the consultation, including panel meetings and ways to get in touch.

The questionnaire below has been designed to help you to record your comments and views. This can be completed and submitted in the following ways:

- Submit to us online at: **https://consultations.nidirect.gov.uk/**
- Download and Email us at: **BreastAssessmentConsultation@health-ni.gov.uk**
- Download, print and post to:

  Reshaping Breast Assessment Services
  Department of Health
  Annexe 3
  Castle Buildings
  Stormont Estate
  Belfast BT4 3SQ

You can also request a meeting with a panel of experts in your local area to ask questions about the proposals and share your views in person. Further details of events in your area will be made available at the above website.

This document is also available in alternative formats on request. Please contact the Department, at the address above or by phoning 9052 0551, to make your request.

Before you submit your response, please read the information at **Annex A** about the effect of the Freedom of Information Act 2000, the Environmental Regulations 2004, the Data Protection Act 1998 (DPA) and the General Data Protection Regulation (EU) 2016/679 on the confidentiality of responses to public consultation exercises.

For further information about how we process your information please see the following link which will take you to the Departmental Privacy Notice:
https://www.health-ni.gov.uk/sites/default/files/publications/health/DoH-Privacy-Notice.pdf

SECTION 1: CONSULTEE DETAILS

CONSULTATION RESPONSE FORM

I am responding:

As an individual _____

As a health and social care professional _____

On behalf of an organisation _____X_____

(please tick one option)

About you or your organisation:

Name (optional):	Eoin Devlin
Job Title:	Assistant Director Health and Wellbeing
Organisation:	Newry Mourne and Down DC
Address:	O'Hagan House Monaghan Row Newry
Tel:	0300 0132233
E-mail:	eoin.devlin@nmandd.org

If replying as an individual, please indicate if you do not wish for your identity to be made public.

The last date for responses to this consultation is19 July 2019.

SECTION 2: CONSULTATION QUESTIONNAIRE

Question 1: Do you agree that a Breast Assessment Network should be established as part of the future service delivery model?	**Yes**	
	No	**X**

Please use this space to expand your answer.

We could not support the establishment of such a network if its aim is to enable the model proposed in this consultation to be implemented. If our concerns as detailed below are considered, then the setting up of the network referred to could be advantageous. Our view is predicated on the final model adopted

Question 2: Do you agree that Breast Assessment Services should be provided in no more than three locations?	**Yes**	
	No	**X**

Please use this space to expand your answer.

This Council rejects the proposals to once again place services a long distance away from our District. We are largely rural in nature and the poor transport links already provide huge difficulties for our residents in accessing medical appointments. This proposal will mean that these problems will be exacerbated for a larger number of our citizens.
At our Council meeting of 3 June 2019, a Notice of Motion was raised in regard to these proposals and the following points were made;

• The breast assessment unit in Craigavon was a vital much needed service and last year 4,700 people had been referred.
• There are currently several live public consultations and fear would be the breast assessment consultation would be overlooked
• Southern Trust had the fastest growing and fastest aging population.
• Targets all currently being met at Craigavon Area unit and unique breast assessment services are provided including: –
➢ Magseed – procedure that detected and removed very small tumours, that otherwise would not be detected by routine screening.
➢ Vacuum assisted excision that minimised extent of surgery and reduced patient trauma.
➢ The only unit in N. Ireland to offer high definition breast tomosynthesis for all patients with family history.
➢ Only area in N. Ireland that had a breast pain clinic and although it operated out of Daisy Hill Hospital, it was linked to Craigavon area hospital.
• The Project Board had recommended that four hospitals be retained providing breast assessment services, however the recommendation from Mr Pengelly was for only three.
• Craigavon area hospital provided a triple assessment service for patients that included seeing a consultant, a radiographer and if

necessary access to the on site pathology department where biopsies were conducted with the result available within one hour.

• Antrim Area Hospital, one of the preferred option hospitals did not have a pathology department and as there was no extra funding being allocated to breast services, the conclusion was that it would remain this way.
• Additional travel distances for patients was a huge consideration and the feedback from the Project Board was that 25% of women who were low risk would decide not to travel to their appointment if the services were moved.

Members spoke in full support of the motion with the following points raised:

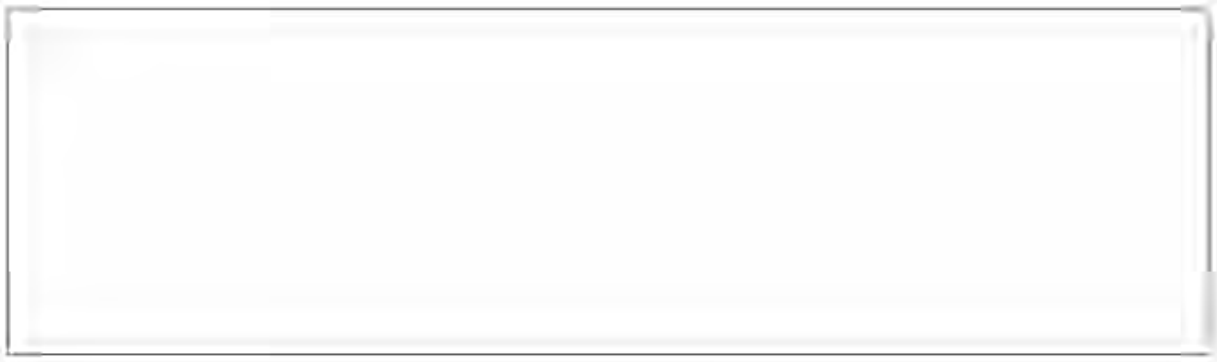
• Any reduction in the breast services should not be tolerated.
• 1% of men were affected by breast cancer.
• The proposal to remove the breast assessment services should be referred to the Southern Trust Area Health Working Group and kept on that agenda so it would continue to be at the forefront of discussions.
• A small delegation should meet the Permanent Secretary to have face to face discussions.
• Craigavon was more centrally located in N.Ireland and therefore was the most suitable location.
• Online consultations were not always easily accessed or downloaded, a potential solution was that downloaded versions could be made available at council offices for the general public to access.
• Council could offer guidance to the public on how to respond to consultations.
• It was disappointing that a public meeting regarding the breast assessment unit was to be held in Craigavon as a lot of people would not be able to attend.
• Closing date for the breast assessment services consultation was 19 July and everyone was urged to respond.

Question 3: Do you agree with the proposal to consolidate service delivery at the three stated locations (i.e. Altnagelvin Area Hospital Antrim Area Hospital, and Greater Belfast (likely to be the Ulster Hospital subject to the development of appropriate patient pathways)?	**Yes**	
	No	**X**

Please use this space to expand your answer.

As in the previous answer I would reiterate that this Council rejects the proposals to once again place services a long distance away from our District. We are largely rural in nature and the poor transport links already provide huge difficulties for our residents in accessing medical appointments. This proposal will mean that these problems will be exacerbated for a larger number of our citizens.

Access to the Ulster Hospital from large parts of our district is impracticable



Question 4: Do you agree that patient referrals to Breast Assessment Services should be managed through central booking system?	**Yes**	**X**
	No	

Please use this space to expand your answer.

The Council would agree that the most up to date efficient booking system available should be utilised wherever the Service is situated not withstanding our objections to the current location proposals

SECTION 3: EQUALITY AND HUMAN RIGHTS

Section 75 of the NI Act 1998 requires departments in carrying out their functions relating to NI to have due regard to the need to promote equality of opportunity:

- between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- between men and women generally;
- between person with a disability and persons without; and
- between persons with dependants and persons without.

You may wish to refer to the Equality Screening, Disability Duties and Human Rights Assessment Template at **https://www.health-ni.gov.uk/consultations**

Question 5: Are any of the options set out in the consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the 1998 Act?	**Yes**	**X**
	No	
If yes, please state the group(s) and provide comment on how these adverse impacts could be reduced or alleviated in the proposals: **The Council believes that those with disabilities and persons with dependants will be adversely impacted by increased travel times.**		
Question 6: Are you aware of any indication or evidence – qualitative or quantitative – that any of the options set out in the consultation document may have an adverse impact on equality of opportunity or on good relations?	**Yes**	**X**
	No	
If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact: **The Council believes that services should be retained at the local hospitals.**		

Question 7: Is there an opportunity to better promote equality of opportunity or good relations?	**Yes**	**X**
	No	
If yes, please give details as to how: **The Council believes that those with disabilities and persons with dependants will be adversely impacted by increased travel times.**		
Question 8: Are there any aspects of the proposals in the consultation where potential human rights violations may occur?	**Yes**	
	No	**X**

SECTION 4: RURAL IMPACT

The Rural Needs Act (NI) 2016 became operational on the 1 June 2017 and places a duty on public authorities, including government departments, to have due regard to rural needs when developing, adopting, implementing or revising policies, strategies and plans and when designing and delivering public services. A draft rural needs impact assessment has been prepared against these policy proposals.

Question 9: Are the actions/proposals set out in this consultation document likely to have an adverse impact on rural areas? (Please Tick)	**Yes**	**X**
	No	
The proposal to centralise this service has an impact on those people living in the more rural areas of our district. Appropriate assistance with travel to attend appointments for this service and other medical; appointments is an issue that members are concerned about		

Responses must be received no later than 5pm on 19 July 2019.

Thank you for your comments.

ANNEX A

Confidentiality and Access to information Legislation

The Department may publish a summary of responses following completion of the consultation process. Your response, and all other responses to the consultation, may be published or disclosed on request in accordance with information legislation; these chiefly being the Freedom of Information Act 2000 (FOIA), the Environmental Information Regulations 2004 (EIR), the Data Protection Act 2018 (DPA) and the General Data Protection Regulation (GDPR) (EU) 2016/679. The Department can only refuse to disclose information in exceptional circumstances. Before you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The FOIA gives the public a right of access to any information held by a public authority, namely, the Department in this case. This right of access to information includes information provided in response to a consultation. The Department cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential.

If you do not wish information about your identity to be made public please include an explanation in your response. Being transparent and providing accessible information to individuals about how we may use personal data is a key element of the DPA and the General Data Protection Regulation (EU) 2016/679. The Department is committed to building trust and confidence in our ability to process personal information. This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances.

For further information about confidentiality of responses please contact the Information Commissioner's Office on **0303 123 1113** or via https://ico.org.uk/global/contact-us/

Department of Health
An Roinn Sláinte
Männystrie O Poustie
www.health-ni.gov.uk

Public Consultation Document

RESHAPING BREAST ASSESSMENT SERVICES

Proposals for the Future Model of Breast Assessment Services for the Population of Northern Ireland

Date of issue: 25 March 2019

Action required: Responses by 19 July 2019

CONTENTS

FOREWORD

By the Permanent Secretary

How we organise our health and social care services is of fundamental importance to the quality of those services.

That's very clear when it comes to breast assessment - the Ministerial standard is that people referred with suspected breast cancer should be seen and assessed within 14 days, however the way breast assessment services are currently delivered across five Trusts has been increasingly struggling to meet this, with women waiting longer than 14 days to be seen and assessed.

This is unacceptable, and without reform it will deteriorate further in future, despite the expertise and superb commitment of staff.

We also have a shortage of specialist staff, especially consultant radiologists. That is a UK-wide problem and while work is ongoing to train and recruit more staff, there are no quick or easy fixes.

With resources too thinly spread across our five Trusts, services are becoming fragile - staff sickness, staff departures and even staff leave can pose significant problems. That can mean longer waiting times, as we've already seen in recent years, increasing sometimes at alarming rates.

There is also a strong clinical consensus supporting the view that the current service provision is no longer sustainable. And while we could try to persevere with the current arrangements for breast assessment, maintaining a struggling system and hoping it will all hold together a little while longer, that would mean accepting an increasingly vulnerable level of service. And the projected growth in demand will only add to this fragility.

Put simply, unless we make changes, more of our citizens will face increased delays in receiving breast assessment, including delays in finding out if they have cancer. We simply cannot tolerate such a situation.

This is the reason for this public consultation, which sets out firm proposals for the future. The aim is to establish a model of care which will provide high quality, safe, sustainable, accessible and timely services. This is achievable with a modest level of consolidation – concentrating provision on three locations that will serve the whole of Northern Ireland.

These issues are not unique to Northern Ireland, and others are also in the process of reviewing how best to organise and deliver services across the UK.

Research carried out by independent experts commissioned by the Department indicates that services which have reorganised into larger centres, catering to greater numbers of patients, deliver more resilient and reliable services as they have greater numbers of personnel. There is evidence that small services have specific problems with insufficient key personnel and as a consequence often deliver poorer results than larger units.

While there will be no change to the breast screening service currently provided by the static and mobile units provided across all five Trust areas, the proposed changes to breast assessment services will, for some people, mean additional journey times. However, research suggests reasonable travel increases are acceptable to patients – if the result is more timely access to high quality care in regional centres of excellence.

My thanks go to the Breast Assessment Project Board for all its work leading up to today's report.

I would encourage as many people as possible to read this consultation document and make their voices heard.

Richard Pengelly
Permanent Secretary, Department of Health

RECOMMENDATIONS AND QUESTIONS

Recommendation 1: A regional Breast Assessment Network will be established by December 2019 to oversee implementation and ongoing delivery of the future model of Breast Assessment Services, to include all Trusts, commissioners and services working together to shape and support service provision for the population of Northern Ireland.

Question 1: Do you agree that a Breast Assessment Network should be established as part of the future service delivery model?

Recommendation 2: Breast Assessment Services for the population of Northern Ireland will be provided in no more than three locations by December 2020.

Question 2: Do you agree that Breast Assessment Services should be provided in no more than three locations?

Recommendation 3: The three breast assessment locations will comprise:

- **Altnagelvin Area Hospital**
- **Antrim Area Hospital**
- **Greater Belfast (likely to be the Ulster Hospital subject to the development of appropriate patient pathways).**

Question 3: Do you agree with the proposal to consolidate service delivery at these three locations?

Recommendation 4: Patient referrals to Breast Assessment Services in Northern Ireland will be managed through a central booking system by December 2020.

Question 4: Do you agree that patient referrals to Breast Assessment Services should be managed through a central booking system?

WHY WE ARE CONSULTING ON BREAST ASSESSMENT SERVICES

The current configuration of breast assessment services does not consistently provide appointments within the national standard waiting times. It is therefore unsustainable.

This document has been published by the Department of Health, referred to below as "the Department" or "DoH", in order to consult the public, service users, patient representatives and other stakeholders on proposals to improve the timely delivery of breast assessment services in Northern Ireland.

It reflects the work and recommendations of the Breast Assessment Project Board ("the Project Board") which was established in 2017 to consider future service model options in light of ongoing capacity constraints and projected increases in demand.

The document:

- describes what is meant by breast services and how these are currently delivered by Health and Social Care in Northern Ireland;
- provides the national standards for waiting times to be seen at breast assessment clinics;
- explains the ongoing challenges of meeting these standards through the current service model;
- summarises the work of the Project Board in engaging with stakeholders to develop and assess options for service improvement; and,
- provides recommendations for service reconfiguration with the objective of securing a service model which will provide a high quality, safe, sustainable, accessible and timely service.

We therefore invite all stakeholders to consider and comment on the recommendations and proposed model for improving breast assessment services. Responses can be submitted using the questionnaire or web link below (see Page 21).

The consultation will run from **25 March 2019** until **19 July 2019**.

Equality, rural, and regulatory considerations are contained at Page **20.**

Information on how to submit your views to the Department is set out at Page **21.**

A consultation response form is provided at **Annex A.**

Other annexes to this document provide further detail about the work of the Project Board to develop options and criteria for the assessment of options, analyse travel times, the outcome of the options appraisal, as well as detailed feedback from engagement carried out with stakeholders as part of this process.

NB. It should be noted that the material in this consultation document refers only to breast assessment clinics. These are the clinics at which people referred because of signs and symptoms of breast cancer are seen and assessed. It also includes the assessment clinics for those women recalled or referred for assessment following their breast cancer screening. Further information about the breast screening programme in Northern Ireland can be found at:
http://www.cancerscreening.hscni.net/Overview_of_Breast_Screening_Programme.htm

WHAT ARE BREAST ASSESSMENT SERVICES?

Breast assessment services provide a 'one stop' outpatient clinic appointment for patients referred with either:

- breast symptoms which may or may not be suggestive of cancer **(symptomatic referrals)**; or
- requiring follow up of a breast screening mammography test **(screening referrals)**. It is estimated that 4 in every 100 women who have screening will require referral for further assessment.

Those attending a breast assessment clinic can undergo a 'triple assessment', including a breast examination, radiological investigations (mammogram or ultrasound), and a biopsy test to further confirm the diagnosis.

Not everyone will require all tests and the majority of those attending will only require one appointment at the clinic.

Due to the range of assessment and investigations provided a multidisciplinary team of specialist staff, often including at least three different medical specialists (surgeon or breast specialist, radiologist and pathologist), and also including radiographers, breast care nurses, medical laboratory scientific officers (MLSOs) and chaperones is required to deliver a breast assessment clinic.

HOW LONG SHOULD IT TAKE TO HAVE A BREAST ASSESSMENT APPOINTMENT?

The national standards relating to waiting times to be seen at breast assessment clinics state that:

- patients referred with **signs or symptoms of suspected breast cancer** (red flag referrals) should be seen **within 14 days**[1];
- patients referred with **signs or symptoms not suggestive of cancer** (routine referrals) should be seen **within 9 weeks**;
- women who require **follow up of a screening mammography** (screening referrals) should be seen **within 3 weeks**[2].

---

1 DHSSPSNI Guidance on completing SDR2 (BC): 'Reporting of the two week target for Breast Cancer Waiting Times' 2008 https://www.healthni.gov.uk/sites/default/files/publications/dhssps/sdr2-guidance-14-day-breast-cancer-waiting-time-target.pdf

2 Public Health England NHS Breast Screening Programme Consolidated standards April 2017 available at:

HOW ARE BREAST SERVICES DELIVERED IN NORTHERN IRELAND?

Currently in Northern Ireland breast assessment services are provided by all five Health and Social Care Trusts at the following locations (see Figure 1 below):

Symptomatic Assessment in 5 locations:

- Altnagelvin Hospital (Western Trust)
- Antrim Area Hospital (Northern Trust)
- Belfast City Hospital (Belfast Trust)
- Craigavon Area Hospital (Southern Trust)
- Ulster Hospital (South Eastern Trust)

Screening Assessment in 4 locations:

- Altnagelvin Hospital (Western Trust)
- Antrim Area Hospital (Northern Trust)
- Craigavon Area Hospital (Southern Trust)
- Linenhall Street (Belfast Trust also serving residents of South Eastern Trust)

Figure 1: Current location of breast assessment services in Northern Ireland

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/612739/Breast_screening_consolidated_standards.pdf

WHY DO WE NEED TO CHANGE THE SERVICE MODEL?

Over recent years there have been a number of growing pressures and challenges facing breast assessment services across Northern Ireland, which can compromise the ability to provide timely care in line with the above standards. These issues are not unique to Northern Ireland, and other regions across the UK have also reviewed how they organise and deliver breast services.

➞ Pressures and Challenges

Factors contributing to these challenges include:

- An increasing demand for breast assessment services, particularly an increasing number of referrals because of signs and symptoms suggestive of breast cancer (also known as red flag referrals);
- A shortage of specialist staff required to provide timely breast assessment services, in particular consultant radiologists. This is reflective of the shortage of radiologists both nationally and internationally, which will be considered separately as part of the Department's regional review of imaging services for Northern Ireland.

➞ Increasing Demand for Symptomatic Referrals

Figure 2 shows the steady rise in the number of referrals for assessment of breast symptoms (symptomatic referrals) over recent years, with an increase of 33% (to 23,701 patients) from 2011/12 to 2016/17 across Northern Ireland.

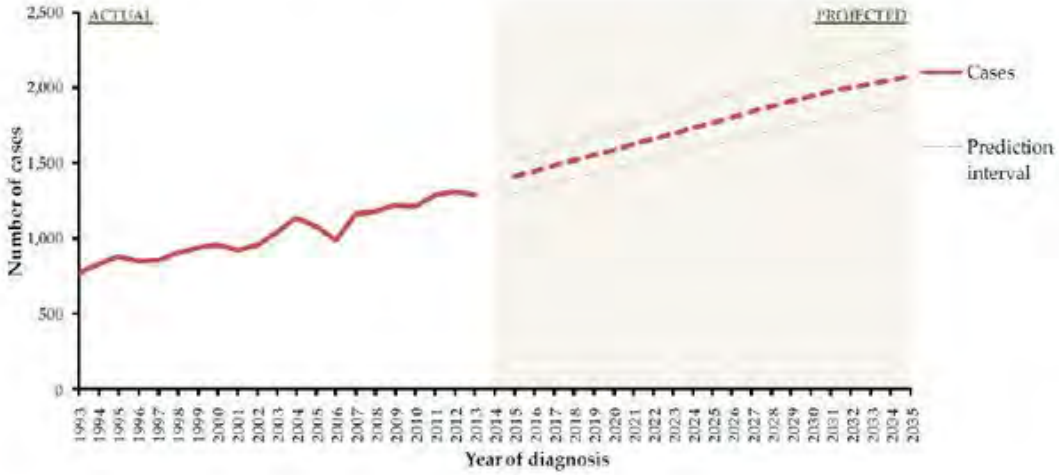
The number of referrals to breast assessment services is also expected to continue to increase (see Figure 3 below). A report on cancer incidence and projected trends in Northern Ireland, by the Northern Ireland Cancer Registry[3] advised that:

'*The combined impact of the projected increase in rates and the increase in the elderly population is expected to be a* ***significant increase in the number of female breast cancers diagnosed.*** *In 2009-2013 there were 1,268 cases of female breast cancer diagnosed each year. By 2020 this is expected to increase to 1,589 cases; a 25% increase. By 2035 the number of cases is forecast to increase to 2,077 per year; a 64% increase on 2009-2013 levels.*'

[3] Gavin A Donnelly T. Cancer incidence trends and projections Cancer Incidence Trends 1993—2013 With Projections To 2035 NICR Belfast available at: http://www.qub.ac.uk/research-centres/nicr/FileStore/PDF/NIrelandReports/Fileroupload.531911.en.pdf#page=47

Figure 2: Number of referrals to breast assessment services in Northern Ireland for red flag/urgent and non-urgent symptoms 2011-2017

Figure 3 Female breast cancer incidence projections to 2035[4]



Increasing Demand for Screening Referrals

Within breast screening, the number of women who attended screening and are subsequently invited to a breast assessment clinic has also demonstrated a

4 Gavin A Donnelly T. Cancer incidence trends and projections Cancer Incidence Trends 1993—2013 With Projections To 2035 NICR Belfast available at: http://www.qub.ac.uk/research-centres/nicr/FileStore/PDF/NIrelandReports/Filetoupload,531911,en.pdf#page=47

steady increase over recent years (Figure 5), which has an impact on the workload within breast assessment clinics.

Rising demand is set to continue as the Northern Ireland breast screening population is projected to steadily increase over the next decade. Figure 6 illustrates the expected growth in the screening population.

Figure 5: Numbers assessed and Cancers Detected 2007-2016[5]

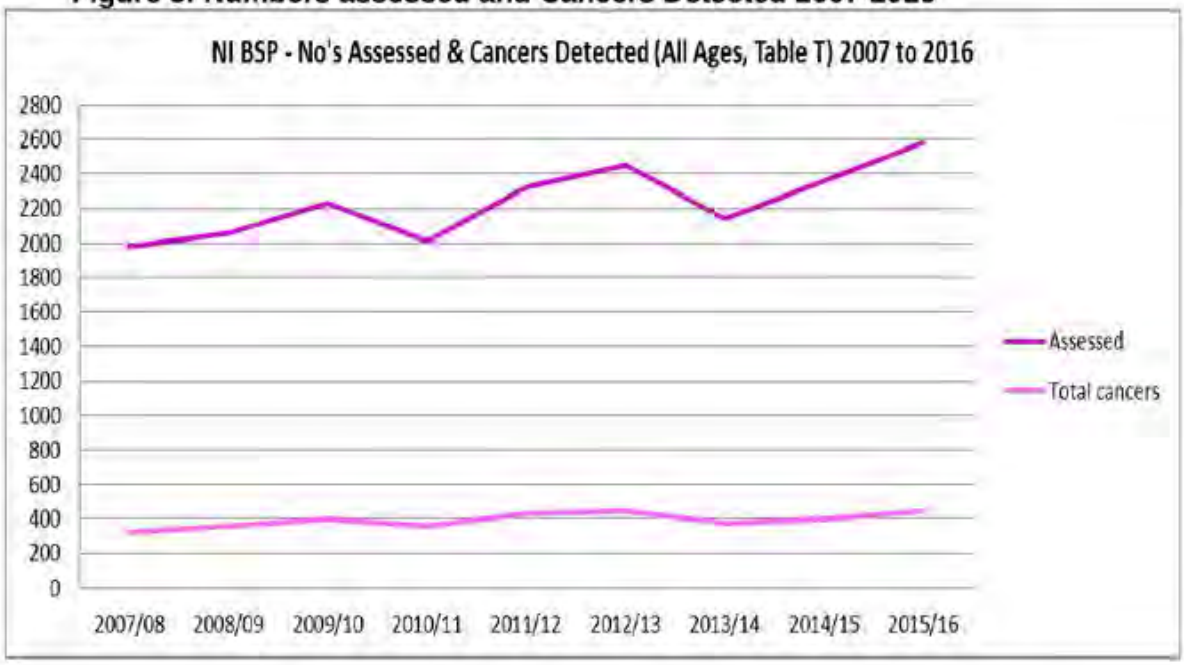
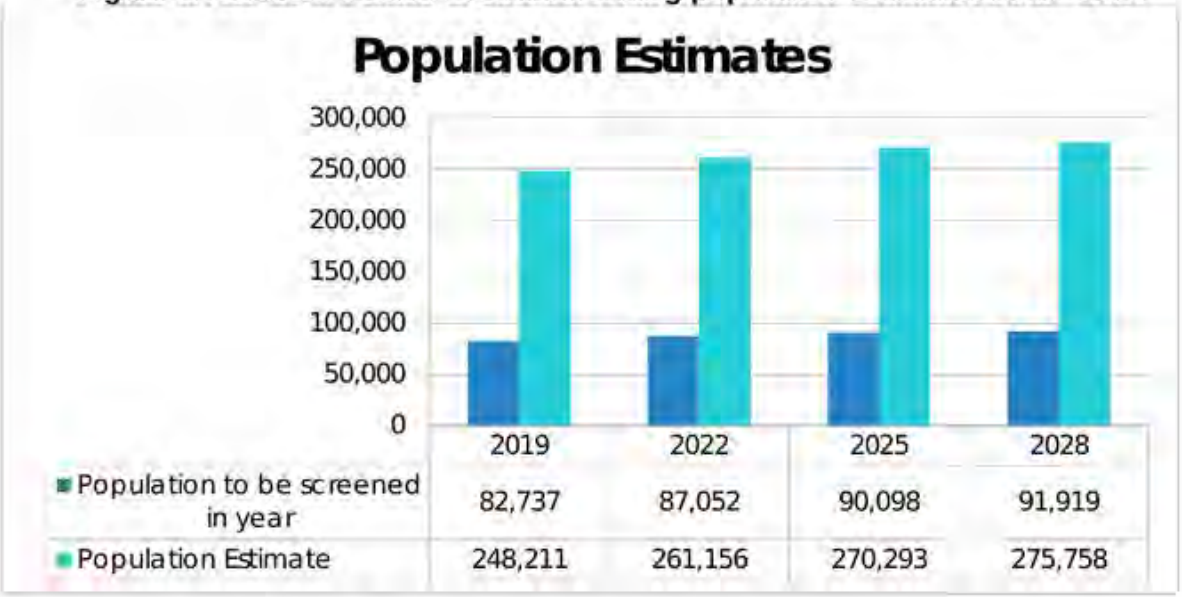


Figure 6. Northern Ireland Breast screening population estimates 2019 - 2028[6]



	2019	2022	2025	2028
Population to be screened in year	82,737	87,052	90,098	91,919
Population Estimate	248,211	261,156	270,293	275,758

[5] Data source: NBSS. This includes self-referrals to the Breast Screening Programme in women aged 70+ routine invitations are for women aged 50 -70.

[6] Data source: BCE (NHAIS) Please note; Population estimate is the whole population of women aged 50 -70. The population to be screened in year is estimated by dividing this figure by 3. This figure includes women aged 50-70 registered with a GP and excludes self-referrals of women aged 70+. These estimates change daily, with changes in population.

The Impact on Service Delivery

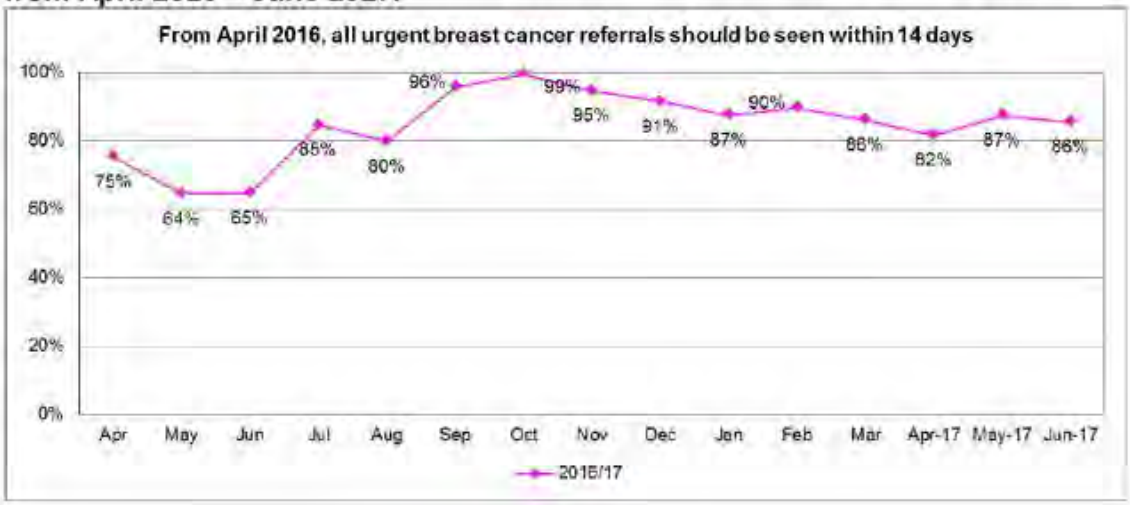
As a consequence of these issues locally, pressures on waiting lists for red flag, routine and screening referrals have continued to mount, with unacceptable impacts on the length of time patients have had to wait for their assessment. For example:

- In one month in 2016, performance in one Trust area fell to 7% of red flag referrals seen within 14 days[7];
- Similar challenges were seen in the assessment service for women referred from screening, due to a reduction in radiology capacity impacting on service delivery;
- In other areas some patients waited for a routine referrals in excess of a year[8].

It should be noted, however, that these challenges and impacts are not unique to any Trust. The variation in performance level illustrated in Figure 7 demonstrates the ongoing pressure in breast assessment services across the region. Also, as vulnerabilities, particularly regarding radiology staffing, exist across all five Trusts the current position remains difficult to sustain in the longer term.

We are spreading our expertise too thinly across too many centres, preventing us from delivering the reliable and sustainable service that patients across Northern Ireland should be able to expect.

Figure 7: Collective performance of breast assessment services in Northern Ireland against the national standard for red flag (urgent) symptomatic referrals from April 2016 – June 2017.



[7] HSCB Performance Management and Service Improvement (PMSID), 14 day Performance matrix 14 day 2016-17
[8] Outpatient Waiting List (Daily Universe) – DWH 13/12/2017

MEETING THE CHALLENGE

In the past, we have aimed to address the immediate challenges through cooperation across the five Health and Social Care Trusts, however it was recognised that these short term measures would not provide a sustainable model of care in which patients could be consistently assured of timely assessment. This is reflected by the ongoing challenges faced today. This section summarises the engagement approach that has led to the consultation recommendations.

Clinical Engagement

In October 2016 a workshop involving clinical leaders from across the region led to consensus on the approach that would be required to improve and sustain the service model. It was agreed that:

- The current service provision is no longer sustainable and that small teams across five Trusts created vulnerabilities in the system;
- Continuity of care between the team assessing a patient and the team undertaking any subsequent treatment for service users is a priority;
- A maximum of three breast assessment service locations would meet the needs of the population, and would provide greater service sustainability;
- Services provided at fewer than three sites would enhance sustainability, but may be challenging to deliver in the short term, with a balance to be struck between resilience and deliverability.

Breast Assessment Project Board

The Project Board was established in April 2017 to review services and develop options for the future model of service delivery. It comprised patient representatives, Trust senior clinical and managerial staff and senior management from the HSCB and PHA.

Further detail about the work of the Project Board, including the approach to developing and assessing options for reconfiguration, site visits, and engagement with service users and patient representatives, can be found at **Annex B**.

In summary, the Project Board developed, appraised and scored a range of options for the future configuration of symptomatic and screening assessment services at one, two, three, or four locations, as well as the status quo (as described at Page 8 above), taking account of quality and safety, sustainability,

timeliness, deliverability, continuity, service interface and geographical access, resilience, staffing models, accessibility and cost effectiveness.

This led to the development of the consultation recommendations, which are described in further detail at Pages 16-19 below.

In developing these options, it was agreed that the following guiding principles should underpin any future model of care:

- Service users should have equitable access to the breast assessment service;
- Service users referred to symptomatic breast assessment services, regardless of priority status, should be managed through a single referral route;
- Service users should be invited to attend a breast assessment clinic at which a range of diagnostics is available, subject to triage;
- Continuity of care should remain a priority for all service users attending a breast assessment clinic;
- Service users with a confirmed cancer who require follow up and treatment should have an identified key worker;
- Services should be monitored in regards to attendance rates, timeliness of assessment and outcomes;
- Any future model of breast services should ensure that screening assessment clinics meet the recognised QA Standards of the Northern Ireland Breast Screening Programme;
- Any future model of breast services should promote a strong cohesive team working environment;
- Any future model of breast services should have the ability to provide service users with culturally appropriate services if required.

➡ Service User and Public Engagement

This section provides a summary of the service user and public engagement undertaken by the Project Board, and the key findings which have led to the development of the consultation recommendations.

In summary, feedback was sought on a range of issues including: travel time and distance; method of transport to clinic; the importance of timely access to the service; duration of clinics; and other factors that would influence patient experience if travelling elsewhere for this service. A variety of methods were used, including:

- Service user questionnaires were distributed by five Trusts in March/April 2017;
- Service user focus groups were facilitated by the HSC Leadership in venues across Northern Ireland in August 2017;
- Public meetings were facilitated by Local Commissioning Groups throughout July and August 2017;
- Project Board members met with community and voluntary sector organisations in July 2017.

The quantitative and qualitative feedback received from the engagement exercises clearly demonstrates that the length of time to wait for an appointment is the most important factor for people who require breast assessment.

Whilst there was variation in the length of time that patients would be willing to travel, there was strong support for travelling further for a timely appointment.

Further detail about the approach is available in the excerpt from the Project Board's draft report at **Annex B**, and the HSC Leadership Centre's Patient Engagement Report at **Annex C**.

RECOMMENDATIONS FOR THE FUTURE SERVICE MODEL

The recommendations set out below take account of the Project Board's appraisal of options and their recommendations (see **Annex B**), and the outcome of a subsequent Project Assessment Review (PAR) commissioned by the Department of Health in 2018.

Please note that the Department fully recognises the ongoing shortage of specialist staff required to provide timely breast assessment services, in particular consultant radiologists. This issue will be considered separately as part of the Department's regional review of imaging services for Northern Ireland.

The consultation questionnaire at **Annex A** seeks stakeholder views on each recommendation.

Recommendation 1: A regional Breast Assessment Network will be established by December 2019 to oversee implementation and ongoing delivery of the future model of Breast Assessment Services, to include all Trusts, commissioners and services working together to shape and support service provision for the population of Northern Ireland.

The future service configuration will require the full participation of the five provider Trusts working as part of a regional network to deliver the service.

All Trusts, whether directly providing breast assessment services or not, would be involved in shaping the future direction of the service, and discussing and agreeing key service issues, such as standardised care pathways, staffing levels and measures to respond to increased demands.

This will facilitate greater collaborative working and provide the opportunity for collective advice and decision making and, importantly, offer significant and visible clinical leadership for this important diagnostic service.

Membership will include service user representatives, commissioners, and multidisciplinary staff from all Trusts, working across Trust boundaries to help deliver and support breast assessment services for the population across Northern Ireland.

Recommendation 2: Breast Assessment Services for the population of Northern Ireland will be provided in no more than three locations by December 2020.

The Project Board considered options for the future configuration of symptomatic and screening assessment services at one, two, three, or four locations, as well as the status quo (as described at Page 7 above), taking account of quality and safety, sustainability, timeliness, deliverability, continuity, service interface and geographical access, resilience, staffing models, accessibility and cost effectiveness.

Given the ongoing vulnerabilities in the current model for symptomatic assessment at five locations, particularly in relation to staffing, a substantive consolidation of sites will be required to sustain services for the population of Northern Ireland in the medium to long term. This is further emphasised by the experience of the breast assessment services for those referred from breast screening – this part of the service is currently delivered at four locations but continues to experience constraints and challenges in meeting waiting time standards.

Therefore, to ensure longer term sustainability of the service, the provision of breast assessment services in no more than three locations represents the optimum future model.

In relation to travel times, the Project Board recognised that any consolidation of breast assessment services on to fewer locations will inevitably result in some people experiencing a modest increase in their journey to reach assessment clinics, however members agreed that this was not a material increase in relation to the ability of people to access services.

Feedback from service user focus engagement (see HSC Leadership Centre report at **Annex C**) highlighted the overarching priority of timeliness of assessment. In this context, the Project Board was of the view that a modest increase in travel times was acceptable if it meant more timely access to care.

A detailed analysis of options including travel times for the various configurations for a future service model is included within **Annex B**.

Recommendation 3: The three breast assessment locations will comprise:

- **Altnagelvin Area Hospital**
- **Antrim Area Hospital**
- **Greater Belfast (likely to be the Ulster Hospital subject to the development of appropriate patient pathways).**

Travel time analysis was based on an assumption that consolidated services would continue to use some of the existing sites.

There are currently three services located within the Greater Belfast Area at the Belfast City Hospital, the Ulster Hospital Dundonald (both symptomatic services) and Linenhall Street (screening assessment service which serves both the population of Belfast and South Eastern Trust areas). As each of these locations are in very close proximity, it is anticipated that a consolidation to a single service would not adversely impact geographical accessibility. It would, however, consolidate the teams which currently work across the three sites and in doing so this would help to provide a high quality, sustainable service. The location of this service will be determined by the Breast Assessment Network as part of the implementation process.

It was also recognised that given the geography of the west, and associated travel times, it would be reasonable to continue to provide a location for a breast assessment service in the Western Trust area.

The travel time analysis showed that:

- Having no provision in the Greater Belfast area will result in more patients travelling beyond 30 minutes (with a Belfast location five out of ten patients would be within 30 minutes travel time and without a Belfast location four out of ten patients would be within 30 minutes travel time).

- Options that excluded the west (Altnagelvin) resulted in more patients travelling up to 90 minutes and beyond (with an Altnagelvin location nine out of ten patients would be within 90 minutes travel time and without an Altnagelvin location eight out of ten patients would be within 90 minutes travel time)

Therefore, the Project Board was of the view that there should be a breast assessment location in the Greater Belfast area provided by South Eastern Trust, Belfast Trust or collectively by both Trusts. It was also considered that there should be a service in the Western Trust area, in Altnagelvin Area Hospital. It was recognised by the Project Board that this would also build on the consistent performance in relation to waiting time standards and success of skills mix initiatives in this service.

Various proposals for the third assessment location were considered including:

- A second site in Greater Belfast (South Eastern Trust or Belfast Trust)
- Antrim Area Hospital
- Craigavon Area Hospital

Each option was considered in terms of ability to provide sustainability, timeliness, accessibility and deliverability. In this context, the Project Board agreed that the Antrim Area Hospital is in the strongest position to serve as the third location due to a number of factors including:

- Demonstrated ability to take on stepped change in activity
- Current provision of the regional Higher Risk Screening service
- Stable coherent team already in place
- Proven recruitment and retention of staff
- Overall performance against 14 day breast cancer target of 97% in 2016/17
- 25%[9], of the population of Northern Ireland reside in the Northern Trust area which represents the largest proportion of all the Trust areas.

Recommendation 4: Patient referrals to Breast Assessment Services in Northern Ireland will be managed through a central booking system by December 2020.

Currently GPs across Northern Ireland refer patients electronically to one of the five Trusts, usually based on geography. This may mean that one Trust continues to receive referrals when it has no capacity, yet other sites may have additional capacity. The PAR team commented that there is not currently a consistent process to address this challenge.

In other health systems, e.g. NHS England, a centralised e-referral *'choose & book'* system is in operation. The clinic appointment slots are released to the system so that the GP and patient can choose a suitable slot at their preferred hospital. The patient has the option to choose to travel further for an earlier or more convenient appointment time.

In the Project Board's draft report, evidence suggested patients were willing to travel further for a timely, high quality service. In addition, the PAR team found that there was considerable support for this concept.

[9] Source: NISRA, Based on 2016 Population Mid-Year Estimates

EQUALITY, RURAL AND REGULATORY IMPACTS

Equality Screening

In accordance with guidance produced by the Equality Commission for Northern Ireland and in keeping with Section 75 of the Northern Ireland Act 1998, the proposed options have been equality screened and a preliminary decision has been taken that a full equality impact assessment is not required at this stage. The preliminary decision is subject to change following analysis of feedback received during the consultation.

Rural Proofing

Rural proofing is a process that aims to make sure that Government policies are carefully and objectively examined to make sure they treat those in rural areas fairly and to make public services available in a fair way, no matter where people live in Northern Ireland. Where necessary, policy adjustments might be made to reflect rural needs and in particular to ensure that as far as possible public services are accessible on a fair basis to the rural community. Throughout the consultation process, careful consideration will be given to the needs of rural communities.

Regulatory Impact Assessment

Any requirement for a Regulatory Impact Assessment will be revisited when there is more clarity on a preferred option as an outcome of this consultation exercise.

GET INVOLVED

You can share your views on Breast Assessment Services in a number of ways.

Our website https://www.health-ni.gov.uk/consultations/reshaping-breast-assessment-services provides full details of the consultation, including panel meetings and ways to get in touch.

A separate questionnaire is available to help you to record your comments and views. This can be completed and submitted in the following ways:

- Submit to us online at: **https://consultations.nidirect.gov.uk/**
- Download and Email us at: **BreastAssessmentConsultation@health-ni.gov.uk**
- Download, print and post to:

  Reshaping Breast Assessment Services
  Department of Health
  Annexe 3
  Castle Buildings
  Stormont Estate
  Belfast BT4 3SQ

You can also request a meeting with a panel of experts in your local area to ask questions about the proposals and share your views in person. Further details of events in your area will be made available at the above website.

This document is also available in alternative formats on request. Please contact the Department, at the address above or by phoning 9052 0551, to make your request.

NEXT STEPS

Following the public consultation, a consultation analysis report will be prepared to inform the identification of a preferred option.

This preferred option will then be subject to an Equality Impact Assessment alongside further consideration of the impact on rural communities.

Implementation of the preferred model is subject to the development and approval of relevant business cases.

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Dept for Infrastructure – Consultation on Model License Conditions for Caravans
Reporting Officer (Including Job Title):	Eoin Devlin, Assistant Director – Health and Wellbeing
Contact Officer (Including Job Title):	Sinead Murphy, Head of Environmental Health (Commercial)

For decision	X	**For noting only**	

1.0	**Purpose and Background**
1.1	**Purpose** To consider and agree to submitting the attached consultation report to the Department for Infrastructure in relation to Model License Conditions under Caravans Act (Northern Ireland) 1963.
1.2	**Background** The Department for Infrastructure is proposing to revise and update the following publications: - • Model Licence Conditions for Caravan Sites 1992; **and** • Model Licence Conditions Residential Caravan Sites 1994. The draft new model conditions will assist councils in deciding the conditions to attach to caravan site licences. They will apply to all caravan sites: • permanent residential caravan sites; • holiday caravan sites; • touring caravan sites; and • Traveller or Roma sites.
2.0	**Key issues**
2.1	The use of land as a caravan site is controlled by relevant planning legislation, whereas the physical standards and layout, amenities and other standards within the site are controlled by a site licence issued by local councils under the Caravans Act (Northern Ireland) 1963 ("the 1963 Act"). Section 5 of the 1963 Act enables councils to set licence conditions. This review has been prompted by the Northern Ireland Human Rights Commission (NIHRC) 'Out of Sight, Out of Mind: Travellers' Accommodation in NI' investigation report published on 6 March 2018. The conditions remain largely unchanged there are some key revisions regarding emergency telephones and fire safety measures . The Council have recently reviewed and updated their license conditions taking into consideration the Northern Ireland Fire and Rescue Service's guidance document "Fire Safety Guide for Caravan Site Operators".

	A review of the proposed changes has shown that there are no significant differences in NMDDC's 2019 model license conditions for Static and Residential caravans. Two comments in relation to provision of sanitary ware and parking of private cars, jet skis and boats have been proposed and are included in the draft consultation response attached. There are currently no licensed Traveller/Roma sites within the Council area that these conditions will be applied to.
3.0	**Recommendations**
3.1	**That the Committee consider and agrees to submitting the attached consultation report to the Department for Infrastructure in relation to Model License Conditions under Caravans Act (Northern Ireland) 1963.**
4.0	**Resource implications**
4.1	None
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified:
7.0	**Appendices**
7.1	Appendix 1: Consultation response letter Appendix 2: Model-licence-conditions-2019-consultation
8.0	**Background Documents**
8.1	None

Model Licence Conditions 2019

Caravans Act (Northern Ireland) 1963
Section 5

Department for Infrastructure
An Roinn Bonneagair
www.infrastructure-ni.gov.uk

Product Code:

ISBN:

Introduction

1. The use of land as a caravan site is controlled by relevant planning legislation, whereas the physical standards and layout, amenities and other standards within the site are controlled by a site licence issued by local councils under the Caravans Act (Northern Ireland) 1963 ("the 1963 Act"). Section 5 of the 1963 Act enables councils to set licence conditions.

2. Under section 5(7) of the1963 Act the Department may from time to time specify model conditions with respect to the lay-out and the provision of facilities, services and equipment for caravan sites or particular types of caravan site; and that, in deciding what (if any) conditions to attach to a site licence, the council shall have regard to any conditions so specified.

3. These conditions revise and update the Model Licence Conditions for Caravan Sites 1992 **and** Model Licence Conditions Residential Caravan Sites 1994 and apply to all caravan sites:
    - permanent residential caravan sites;
    - holiday caravan sites;
    - touring caravan sites; and
    - Traveller or Roma sites.

4. This review has been prompted by the Northern Ireland Human Rights Commission (NIHRC) 'Out of Sight, Out of Mind: Travellers' Accommodation in NI' investigation report published on 6 March 2018. The report made a number of recommendations for public authorities including that the Department should:

    "review the legal and policy framework concerning site licences. This should include the development of a model site licence setting out the minimum standard of provision and safety requirements for each type of Travellers site in NI, along with enforcement powers for any breach."

5. While addressing the report's recommendation the Department has also taken the opportunity to amalgamate the current Model Licence Conditions for holiday caravan sites as well as residential caravan sites into one document, creating greater clarity and ease of reference for councils and stakeholders. In parallel

and in response to a recommendation by NIHRC, the Department for Communities has completed its review of the Design Guide for Travellers' Accommodation 2019, and will be consulting shortly. The Design Guide is intended to support the provision of appropriate, cost effective sites for Travellers living in Northern Ireland.

6. Although the conditions remain largely unchanged there are some key revisions regarding emergency telephones and fire safety measures.

7. These conditions should be considered when:-
    - applying licence conditions to new sites;
    - applying licence conditions to sites that have been substantially redeveloped; or
    - renewing or reviewing a current licence.

8. Where current licence conditions are adequate in serving their purpose, the council do not need to apply new conditions.

9. Where it is appropriate to amend an existing condition or apply a new condition to a licence the council must be able to justify its reasons for doing so, having regard to all the relevant circumstances of the site. In deciding whether to apply a new condition the council must have regard to the benefit that the condition will achieve and the interests of both residents and site owners (including the cost of complying with the new or altered condition) and should consult the site licence holder on the proposed variations. They may also wish to consult with residents or a Residents' Association, where appropriate.

10. The model conditions represent those standards normally to be expected as a matter of good practice on caravan sites. They should be applied with due regard to the particular circumstances of the relevant site, including its physical character, any relevant services, facilities or other amenities that are available within or in the locality of the site and other applicable conditions.

11. The council should also consider the Northern Ireland Fire and Rescue Service guidance[1] and the Department for Communities Design Guide for Travellers

[1] "NIFRS Fire Safety Guide for Caravan Site Operators", available via NIFRS website at www.nifrs.org

when applying conditions on a site licence.

12. The explanatory note to this document provides advice on the application and enforcement of the model conditions when considering attaching conditions to licences.

13. Councils should allow a reasonable period of time after any site licence alteration for compliance with the revised conditions, unless the reason for making the alteration is to address a matter requiring immediate attention.

14. When considering taking enforcement action councils should undertake a risk assessment to take into account all possible factors in relation to the prosecution.

15. This document should be referred to as Model Licence Conditions 2019.

Interpretation

16. In the model conditions any references to "site" includes a park home site (including a mobile home site) and to "caravan" includes a mobile or park home.

17. In this document the term "site owner" is referred to throughout, as normally that person would be the licence holder.

THE MODEL CONDITIONS

1. The Boundaries and Plan of the Site

(i) The boundaries of the site from any adjoining land should be clearly marked by a man made or natural feature.

(ii) No caravan or combustible structure should be positioned within 3 metres of the boundary of the site.

(iii) A plan of the site should be supplied to the council upon the application for a licence and, thereafter whenever there is a material change to the boundaries or layout of the site, or at any other time on the demand of the council.

(iv) The plan supplied must clearly illustrate the layout of the site including all relevant structures, features and facilities on it and should be of suitable quality.

2. Density and Spacing Between Caravans

(i) Subject to the following variations the minimum spacing distance between any two caravans should not be less than 6 metres in permanent residential caravan sites, touring caravan sites and Traveller or Roma sites. On holiday caravan sites the minimum spacing should not be less than 5 metres between caravans made of aluminum or 6 metres between those made of plywood or similar skin. Where there is a mixture of holiday caravans of aluminum and plywood the separation distance should be 6 metres.

(ii) The point of measurement of porches, awnings etc. is the exterior cladding of the caravan, excluding the draw bar. The distance from any part of a caravan to any part of a road within the site should not be less than 2 metres.

(iii) Porches may protrude 1 metre into the 5 or 6 metres space and should be of the open type.

(iv) Where awnings are used, the distance between any part of the awning and an adjoining caravan should not be less than 3 metres. They should not be of the type which incorporates sleeping accommodation and they should not face each other or touch.

(v) Eaves, drainpipes and bay windows may extend into the 5 or 6 metre space provided the total distance between the extremities of 2 adjacent units is not less than 4.5 metres in a 5 metre space, or 5.25 metres in a 6 metre space.

(vi) Where there are ramps for disabled, verandahs or stairs extending from the unit, there should be 4.5 metres (3.5 metres on holiday caravan site which has holiday caravans only) clear space between them and such items should not face each other in any space. If they are enclosed, they should normally be considered as part of the unit and, as such, should not intrude into the 5 or 6 metres space.

(vii) A garage, a shed or covered storage space should be permitted between units only if it is of substantially non-combustible construction (including non-combustible roof) and sufficient space is maintained around each unit so as not to prejudice means of escape in case of fires. Windows in such structures should not face towards the unit on either side. Car ports and covered walkways should in no circumstances be allowed within the 5 or 6 metres space. For cars and boats between units see paragraph 12.

(viii) The density should be consistent with safety standards and health and amenity requirements. The gross density should not exceed:-

- 50 caravans per hectare in permanent residential caravan sites and Traveller or Roma sites
- 60 caravans per hectare in holiday caravan sites; and
- 75 caravans per hectare in touring caravan sites;

calculated on the basis of the usable area (i.e. excluding lakes, roads, communal services and other areas unsuitable for the siting of caravans) rather than the total site area.

3. Roads, Footpaths, Pavements, Gateways and Overhead Cables

(i) Roads and footpaths should be designed to provide adequate access for emergency vehicles.

(ii) Emergency vehicle routes within the site should be kept clear of obstruction at all times.

(iii) New roads should be constructed and laid of suitable bitumen macadem or concrete with a suitable compacted base.

(iv) All roads should have adequate surface water/storm drainage.

(v) New two way roads should not be less than 3.7 metres wide, or if they are designed for and used by one way traffic, not less than 3 metres wide.

(vi) One-way systems should be clearly signposted.

(vii) Where existing two way roads are not 3.7 metres wide, passing places should be provided where practical.

(viii) Vehicular access and all gateways to the site must be a minimum of 3.1 metres wide and have a minimum height clearance of 3.7 metres.

(ix) Roads and footpaths should be maintained in a good condition.

(x) Cable overhangs must meet the statutory requirements.

(xi) Every caravan should be connected to a road by a footpath with a hard surface.

(xii) Where practicable, communal footpaths and pavements should not be less than 0.9 metres wide.

4. Lighting

(i) Taking into account the needs and characteristics of a particular site, roads, communal footpaths and pavements should be adequately lit between dusk and dawn to allow the safe movement of pedestrians and vehicles around the site during the hours of darkness.

5. Bases

(i) Every unit must stand on a concrete base or hard-standing.[2]

(ii) The base must extend over the whole area occupied by the unit, and must project a sufficient distance outwards from its entrance or entrances to enable occupants to enter and leave safely. The hard standings must be constructed to the industry guidance, current at the time of siting, taking into account local conditions.

6. Maintenance of Common Areas, including Grass, Vegetation and Trees

(i) Every part of the site to which the public have access should be kept in a clean and tidy condition.

(ii) Every road, communal footpath and pavement on the site should be

[2] Councils should refer to paragraph 25 in the Explanatory Notes in respect of holiday/touring sites.

maintained in a good condition, good repair and clear of rubbish.

(iii) Grass and vegetation should be cut and removed at frequent and regular intervals.

(iv) Trees within the site should (subject to the necessary consents) be maintained.

(v) Any cuttings, litter or waste should be removed from the immediate surrounds of a pitch.

7. Supply & Storage of Gas etc.

(i) Gas (including natural gas) and oil installations, and the storage of supplies should meet current statutory requirements, relevant Standards and Codes of Practice.

(ii) Liquefied Petroleum Gas cylinders must not be positioned or secured in such a way as to impede access or removal in the event of an emergency.

8. Electrical Installations

(i) On the site an electricity network of adequate capacity should be installed to meet safely all reasonable demands of the caravans and other facilities and services within it.

(ii) The electrical network installations are subject to regulation under current relevant legislation and must be designed, installed, tested, inspected and maintained in accordance with the provisions of the current relevant statutory requirements.

(iii) Any work on electrical installations and appliances should be carried out only by persons who are competent to do the particular type of work being undertaken, in accordance with current relevant statutory requirements.

(iv) Any work on the electrical network within the site should be done by a competent person fully conversant with the appropriate statutory requirements.

9. Water Supply

(i) All pitches on the site should be provided with a water supply sufficient in all respects to meet all reasonable demands of the caravans situated on them.

(ii) All new water supplies should be in accordance with all current legislation, regulations and relevant British Standards.

(iii) All repairs and improvements to water supplies and installations should be carried out to conform with current legislation and British Standards.

(iv) Work on water supplies and installations should be carried out only by persons who are qualified in the particular type of work being undertaken and in accordance with current relevant legislation and British Standards.

10. Drainage and Sanitation

(i) Surface water drainage should be provided where appropriate to avoid standing pools of water.

(ii) There should be satisfactory provision for foul and waste water drainage either by connection to a public sewer or sewage treatment works or by discharge to a properly constructed septic tank or cesspool approved by the council.

(iii) All drainage and sanitation provision should be in accordance with all current legislation and British Standards.

(iv) Work on drains and sewers should be carried out only by persons who are qualified in the particular type of work being undertaken and in accordance with current legislation and British Standards.

(v) For caravans without their own water supply and water closets, clean and properly maintained communal toilet blocks should be provided, with adequate supplies of water, to at least the following scales:-

- Men: 1 WC and 1 urinal per 5 caravans or less;
- Women: 2 WCs per 15 caravans or less;
- 1 wash basin for each 2 WCs (or urinals).

(vi) Toilet blocks should be sited conveniently so that all site occupants may have reasonable access to one by means of a road or footpath.

(vii) On holiday and touring caravan sites, where laundry facilities are not available, at least one deep sink with adequate supplies of hot and cold water should be provided.

11. Refuse Storage & Disposal

(i) Where communal refuse bins are provided these should be housed within a properly constructed bin store.

(ii) All refuse disposal should be in accordance with all current legislation and regulations.

12. Parking

(i) Private cars, jet skis and boats may be parked between adjoining caravans provided that they do not obstruct entrances to caravans or access around them and they are a minimum of 3 metres from an adjacent caravan.

(ii) Fuel tanks for motor boats should be disconnected and stored in a shaded area, not below a caravan.

(iii) Suitably surfaced parking spaces should be provided to meet the requirements of residents and their visitors.

13. Communal Recreation Space

(i) On sites where it is practical to do so, suitable space equivalent to about one tenth of the total area of the site should be allocated for recreational purposes, unless in the council's opinion there are adequate recreational facilities within a close proximity to the site.

14. Notices and Information[3]

(i) The name and address of the site should be displayed on a sign in a prominent position at the entrances to the site together with the current name, address and telephone number of the licence holder and manager and emergency contact details.

(ii) In addition, the following should be available for inspection in a prominent place on the site:-

- a copy of the current site licence
- a copy of the most recent periodic electrical inspection report.
- a copy of the site owner's certificate of public liability insurance.
- a copy of the local flood warning system and evacuation procedures, if appropriate.
- a copy of the fire risk assessment made for the site (if required by the NIFRS Caravan Sites Operators Guide).

(iii) A current plan of the site with roads and pitches marked on it should also be prominently displayed at the entrances.

(iv) All notices should be suitably protected from the weather and from direct

[3] Councils should refer to paragraph 67 in the Explanatory Notes when applying Conditions 14(ii) and (iii) in respect of NIHE sites.

sunlight, preferably in area lit by artificial light.

15. Emergency Telephone

(i) An emergency telephone for calling the emergency services is only required if mobile phone reception in the area is poor.

(ii) If provided, the telephone should be immediately accessible and a notice by the telephone should include the name, address and postcode of the site.

16. Flooding

(i) The site owner should establish whether the site is at risk from flooding by referring to the Department for Infrastructure's Flood Maps.

(ii) Where there is risk from flooding the site owner should consult the Department for Infrastructure (Rivers) for advice on the likelihood of flooding, the depths and velocities that might be expected, the availability of a warning service and on what appropriate measures to take.

17. Fire Safety Measures[4]

Fire Points

(i) These points should be located so that no caravan or site building is more than 30 metres from a fire point. Equipment provided at a fire point should be housed in a weather-proof structure, easily accessible and clearly and conspicuously marked "FIRE POINT".

Fire Fighting Equipment

(ii) All fire hydrants should conform to the current British Standard.

(iii) Access to hydrants and other water supplies should not be obstructed or obscured.

Fire Warning

(iv) A suitable means of raising the alarm in the event of a fire should be provided at each fire point on permanent residential caravan sites, holiday caravan sites and touring caravan sites.

[4] Councils should consider the "NIFRS Fire Safety Guide for Caravan Site Operators", available via NIFRS website at www.nifrs.org. See paragraph 75 of explanatory notes.

Maintenance and Testing of Fire Fighting Equipment

(v) All alarm and firefighting equipment should be installed, tested and maintained in working order by persons who are qualified in the particular type of work being undertaken and be available for inspection by, or on behalf of, the licensing authority or the Fire and Rescue Service.

(vi) A record should be kept of all testing and remedial action taken.

(vii) All equipment susceptible to damage by frost should be suitably protected.

Fire Notices

(viii) A clearly written and conspicuous notice should be provided and maintained at each fire point to indicate the action to be taken in case of fire. This notice should include the following:

"On discovering a fire:

I. Ensure the caravan or site building involved is evacuated.

II. Raise the alarm.

III. Call the fire brigade (the nearest phone is sited at ……..)."

In applying the conditions above in respect of fire safety measures the council should refer to NIFRS Fire Safety Guide for Caravan Site Operators. As regards to Traveller/Roma sites the guidance emphasises that in the event of a fire the occupier should Get Out, Get the Fire and Rescue Service Out, and Stay Out and therefore the provision of fire points, fire fighting equipment or a fire warning is not recommended.

Annex to Model Licence Conditions 2019 for Caravan Sites in Northern Ireland: Explanatory Notes

MODEL LICENCE CONDITIONS – EXPLANATORY NOTES

Introduction

1. These explanatory notes are designed to be read in conjunction with Model Licence Conditions 2019 in Northern Ireland ("the conditions") and are intended to offer guidance on the application and enforcement of the conditions for councils.

2. The Model Licence Conditions as laid out represent what would normally be expected as a matter of good practice on such sites. They should be applied with due regard to the particular circumstances of each case, including the physical character of the site, any facilities or services that may already be available within convenient reach and other local conditions.

3. It is recognised that not all sites will easily be able to meet the Model Licence Conditions in every case due to their particular characteristics, but a council will need to be able to justify any decision not to have regard to the Model Licence Conditions in setting a licence condition.

4. The Model Licence Conditions are not intended to be the "ideal"; councils may in the circumstances set more demanding ones if it is appropriate and can be justified.

5. There will be some licence conditions which require inter and cross agency input and advice from other teams within the council and outside organisations, such as the Health and Safety Executive Northern Ireland, the Northern Ireland Fire and Rescue Service, Northern Ireland Water and the Northern Ireland Environment Agency. It is important for all parties concerned with sites that effective lines of communication are established to ensure that any problems are identified and resolved as early as possible.

6. Disability Discrimination legislation applies to sites and this should be borne in mind when framing licence conditions and considering possible enforcement action. Guidance can be found at www.nidirect.gov.uk and this can also help councils in their consideration of licence conditions. Further guidance can also be found on the Equality Commission's website at https://www.equalityni.org.

Legal background

7. Under the 1963 Act, most privately owned sites must be licensed by the council, unless exempted under the 1963 Act[5]. A licence will be granted unless the applicant does not have relevant planning permission to operate the site or has had a licence revoked in the last three years.[6]

8. The council may attach conditions to the licence, but these can only relate to the physical use of the site and its management[7]. The Department for Infrastructure may issue Model Licence Conditions which the council must have regard to in deciding what conditions to attach to a licence[8]. The council may from time to time alter a site licence condition (either of its own volition or upon the application of the licence holder)[9].

9. A licence holder may appeal against the imposition of a condition in a licence or any proposed alteration to a condition or a refusal to alter a condition[10].

10. It is an offence to breach a licence condition and on summary conviction the offender can currently be fined up to £2,500[11]. Where a condition requires works to the site to be carried out and these are not done either within the time specified or to the satisfaction of the council, the council may carry out the works itself and recover from the licence holder any expenses it has reasonably incurred in doing so[12].

11. The council may apply to the court to have a licence revoked if the licence holder has been convicted on two or more occasions of breaches of licence conditions[13].

12. The council is required, under section 22 of the Act, to maintain an accurate register of the site licences in their area. Given the number of different types of sites that councils may deal with, it is recommended that the register

[5] Section 2 and Schedule to the 1963 Act set out in which circumstances a site licence is not required.
[6] Section 3 (3) and (6).
[7] Section 5 (1) to (6). For restriction see Mixnam's Properties v Chertsey UDC A.C. 735.
[8] Section 5 (7).
[9] Section 8.
[10] Sections 7 and 8 (2).
[11] Section 9 (1). The maximum penalty on summary conviction is a fine not exceeding level 4 on the standard scale.
[12] Section 9 (4).
[13] Section 9 (2).

shows what type of site each is, be it holiday, residential, mixed use or Traveller. It is recommended as a minimum the information the site register has is:

- Name and address of site (if available the Geographic Information Service mapping code should also be logged)
- Name of the licence holder, the site owner (if different) and any person managing the site on behalf of either of those persons
- Type of site
- The number of pitches
- The licence conditions (if any)

The Boundaries and Plan of the Site

1. The boundary should clearly define the limit of the site owner's responsibility. The boundary should be suitably marked and properly maintained. This boundary could be formed of a fence, hedge, wall or natural feature or any other suitable structure (or any combination of these) or it may in whole, or part, be formed by an appropriate natural feature, such as a river or a wood. It would not normally be appropriate for that natural feature to simply include an open field.

2. Plans of the site should be provided to the council at the site owners' expense.

3. It is best practice for copies of the plan to be made available to the emergency services.

4. The 3 metre separation distance inside the boundary serves the purpose of ensuring privacy from whatever is on the other side of the boundary, such as a road, and other developments, such as houses etc. This may not be necessary given the particular characteristics of the site.

5. The 3 metre separation distance measurement should be taken from the caravan wall.

Density and Spacing Between Caravans

6. The 5 or 6 metre separation distance is required for two reasons:

    • Health and safety considerations; and

    • Privacy from neighbouring caravans.

7. Health and safety matters, such as the positioning of gas bottles, etc. should also be taken into account.

8. For the purposes of calculating the distance between the caravans, the point from which measurements are taken is the exterior cladding of the relevant caravan. Eaves, drainpipes, gutters, sills, threshold, door canopies and bay windows should be discounted.

9. Porches should not render the home incapable of being moved, which means they should be demountable.

10. If structures, other than garages, are on pitches within the separation distance and are of a combustible construction, then the council should consider allowing sufficient time for them to be replaced with an acceptable non combustible model.

11. At no time should a garage constructed of combustible material be allowed in the separation distance.

Enforcement

12. In considering the enforcement of the separation distance the council should refer to the Northern Ireland Fire and Rescue Service guidance. It should also seek the views and take account of representations from the site owner and affected residents before taking any steps to enforce this condition, where practicable.

13. Before the council undertakes any enforcement action it should consider the benefit of the works against the potential impact on the residents' enjoyment of their caravans and the cost to the site owner.

Roads, Footpaths, Pavements, Gateways and Overhead Cables

14. Roads should be constructed of bitumen macadam or concrete with suitable compacted base. However, sites with roads constructed of tarmacadam should not be required to automatically upgrade their roads. The roads should only be required to be upgraded as and when they begin to fall into disrepair.

15. Some larger sites may have traffic calming measures such as speed humps on their roads. Though not specifically covered in this standard, it will be worth ensuring that any legal requirements applying to un-adopted roads are met. Guidance and assistance can be found on the Department for Infrastructure website, www.infrastructure-ni.gov.uk.

16. Gateways, roads and turnings should have enough clearance to allow safe entry for emergency vehicles and new units on lorries. The widths and heights

given are based on the maximum sizes of emergency vehicles that may regularly attend incidents on sites.

17. In determining the permitted height of cable overhangs the council must take into account the current statutory requirements. Those applying as at the date of this guidance are found in the Electricity Safety Quality and Continuity Regulations (Northern Ireland) 2012 SR 2012/381 (ESQCR). These regulations provide that, in general, cables should not overhang a road at a height of less than 5.8 metres for lines not exceeding 33KV.

18. The Technical Specification (TS) published by the Energy Networks Association (ENA) "ENA TS 43-8" specifies that where:

    - The overhead line follows a route along a hedgerow, fences, boundary walls or similar features, the minimum clearance in these circumstances is 4 metres.

    - The overhead line crosses a driveway with an access width of no more than 2.5 metres (and the driveway is defined by gateposts or similar features), the minimum clearance is 4.3 metres.

    Further advice on minimum clearances is available from the Health and Safety Executive Northern Ireland.

19. It is good practice that all overhead lines on sites should be fully insulated and where a cable is within easy reach of a property; it must be so and protected from interference.

20. Where the site owner generates their own electricity, the council should require the site owner to comply with regulation 3 of the ESQCR and in considering any enforcement action in relation to cables must consult with the HSENI.

21. Communal path widths should normally be 0.9 metres in respect of new sites or sites that are undergoing substantial redevelopment (including expansion to part of the site); otherwise paths of not less than 0.75 metres should be accepted where they already exist.

Lighting

22. The lighting provided for communal paths and roads should be adequate to allow safe movement around the site during the hours of darkness. Many sites use low lighters rather than traditional street lamps and these work well as long as they are well maintained and plants/vegetation are not allowed to grow around them and stop them emitting light effectively. The lighting must be fit for purpose i.e. to allow vehicles and pedestrians to navigate around the site between dusk and dawn.

Bases

23. It is important to note that the construction, maintenance and repair of the concrete base are the responsibility of the site owner. New bases should be laid as a minimum in accordance with the current industry guidelines.

24. Particular attention should be paid to the terrain of the site before a base is laid, which may mean a thicker base is needed. The base should be sufficient to handle the load placed upon it by the caravan and its contents.

25. On holiday caravan sites and touring caravan sites hard standings may not be necessary if the caravans are removed during the winter or if the ground on which they are situated is firm and safe in poor weather conditions.

Enforcement

26. When considering any enforcement action, the council should also seek the views and take account of representations from the site owner and affected residents before taking any steps to enforce this standard, where practicable.

27. Before the council undertakes any enforcement action it should consider the benefit of the works against the potential impact on the residents' enjoyment of their homes and the cost to the site owner.

28. Where a caravan has to be removed in order to facilitate works to the base the council should normally, if it is feasible and if it is the resident's wish, require the site owner to reinstate, at his own expense, the caravan on the original pitch on completion of the works.

Maintenance of Common Areas, including Grass, Vegetation and Trees

29. Cut grass and vegetation should be removed from the site as soon as practicable. Bonfires should not be used as a means of disposal. Vegetation is often used for sight screening but should be kept at a reasonable height.

30. Trees on the site will normally be the responsibility of the site owner. Where trees are in need of care and maintenance the council should, before any action is taken, liaise with the officer responsible for trees at the council to ensure that all statutory and other requirements are complied with.

31. The common parts of the site (including roads, paths and pavements) must be kept free of any rubbish and maintained in a clean and tidy condition. The council may wish to consider whether appropriate receptacles for litter need to be provided in such areas. In any case the site owner should be required to make arrangement for the regular collection of routine rubbish from the site. They should also be required to make arrangements for the prompt disposal of waste and other materials which accumulate on the site during any works etc. Secure non combustible facilities should be provided on the site for the proper storage of rubbish and waste prior to its removal and disposal off the site.

Supply and Storage of Gas etc.

32. The Health and Safety Executive Northern Ireland ("HSENI") website, www.hseni.gov.uk, provides details and information about the various legislative requirements and contacts if further information is needed. In addition the trade body for LPG suppliers, uklpg, www.uklpg.org, also has information which may be of use.

33. Anyone being employed by a site owner to carry out work on gas (including natural gas) or oil installations should be suitably qualified to do the work. The HSENI pages contain details of various certification schemes which may apply.

Enforcement

34. In considering whether to take enforcement action for a breach of site licence conditions officers should liaise with the HSENI to ensure any action taken by the authority is not in conflict with any action the HSENI is proposing to take.

35. Council officials who identify areas of concern on sites should always consult the HSENI about the problem(s).

36. All new installations must be to the current regulations and maintained at that standard.

Electrical Installations

37. The electrical installations on the site will be a distributor's network either belonging to the regional electricity network operator or the owner of the site. The Department for Economy's website: www.economy-ni.gov.uk contains information on legislation regarding the electricity supply in Northern Ireland.

38. A suitably qualified person for the purpose of carrying out work on electrical installations and appliances, including maintenance and inspections, includes a professionally qualified electrical engineer, a member of the Electrical Contractors Association, a contractor approved by the National Inspection Council for Electrical Installations Contracting, or a qualified person acting on behalf of the above.

39. It may be necessary to ensure the electricity distribution network complies with ESQCR, in which case such work should only be undertaken by a competent person familiar with those Regulations.

40. All new installations must meet the requirements of the current regulations and maintained at that standard.

Enforcement

41. In considering whether to take enforcement action for a breach of site licence conditions, officers should liaise with the HSENI to ensure any action taken by the authority is not in conflict with any action the HSENI are proposing to take.

42. Council officials who identify significant areas of concern with site electrical networks and installations should always consult the HSENI about the problem(s).

Water Supply

43. The Utility Regulator lays down service standards for Northern Ireland Water ("NI Water) and details can be found on its website at www.uregni.gov.uk. In addition,

there are various schemes for suitably qualified persons and authorities should check to see that those undertaking works are qualified. The main scheme is run by NIC certification and details can be found about the scheme at www.niceic.com

44. Where the water supply is wholly or partially supplied from a private water supply such a supply should be registered with the Drinking Water Inspectorate before use. Further information can be obtained from https://www.daera-ni.gov.uk/articles/private-water-supplies .

45. On any site of two or more caravans the site owner must consult with NI Water in respect of installing a water supply to the site.

Enforcement

46. With the majority of well-established sites enforcement of this section will need to be carefully handled, as most sites will have long established water systems. As with gas and electricity above, there may be a case for dual enforcement if an offence is identified. Consultation with NI Water and the Drinking Water Inspectorate for Northern Ireland within the Department of Agriculture, Environment and Rural Affairs is essential.

47. As with the previous sections, council officers who identify an issue with water supply on a particular site may wish to advise NI Water and the Drinking Water Inspectorate for Northern Ireland of the problem.

48. All new installations must be to the current regulations and maintained at the appropriate standard.

Drainage and Sanitation

49. As with water supplies, provision of sewerage facilities is overseen by the Utility Regulator.

50. It is important that all drains and sewers are well maintained and are connected to the appropriate system. If left unchecked, there can be consequences for the health of residents, along with those who live near the site.

51. Where the proposed site is serving multiple caravans, those constructing must consider the requirements of Article 161 of the Water and Sewerage Services

(Northern Ireland) Order 2006, as amended, with regards the construction and adoption of sewers serving two or more units.

52. It should be noted that the environmental quality of drainage is regulated by the Northern Ireland Environment Agency, with whom the council must consult about any problems.

53. Where appropriate, particular consideration should be given to the needs of disabled people in the provision made for water points, toilets, washing points and showers.

Enforcement

54. In considering whether to take enforcement action for a breach of site licence conditions officers should liaise with NI Water and the Northern Ireland Environment Agency to ensure any action taken by the council is not in conflict with any action NI Water or the Northern Ireland Environment Agency are proposing to take.

55. Council officials who identify areas of concern on sites should alert NI Water and the Northern Ireland Environment Agency to the possible defects.

56. All new installations must be to the current regulations and maintained at that standard.

Refuse Storage and Disposal

57. If communal bins are provided they should be housed within a properly constructed bin store. Liaison with colleagues who deal with refuse collection matters will help in ensuring that the bins provided by the site owner (in the case of communal bins) are acceptable to the council in pursuance of its collection of rubbish from them.

58. The site owner should be required to discuss with the council arrangements for the separation of waste for the purpose of recycling it, and required to provide the necessary receptacles etc. on the site.

Parking

59. Parking needs will vary considerably between individual caravan sites. Parking

requirements should reflect the reasonable needs of the residents, having regard to the size and layout of the site, the number of units, the occupation criteria of the site and the availability of public transport in the immediate vicinity.

60. Provision of parking spaces on new sites or those undergoing redevelopment or extension should be consistent with local planning policies.

Communal Recreation Space

61. This standard should only be applied if the council is satisfied that it is both practicable to provide recreation space on the site and there is insufficient recreation space off the site in the near locality.

62. It will only be practicable to provide such space on the site if there is sufficient open space which is available and it is possible to safely use that space for recreation. The standard requires the council to consider the need for recreation space; it does not require it to consider the need for recreation facilities, although the council may consider that need as part of a licence condition. The larger the site the more recreation space or spaces may be needed. On small sites there may be no need for space at all. In deciding whether it is practicable to provide the space the council should also consider the site layout, the availability of private open spaces (e.g. within the pitch), the availability of other amenities on the site (e.g. club houses) and the age and number of residents on the site.

63. On site recreation space may be considered unnecessary if there is sufficient suitable space available off site within close (walking) distance of it. The space must, however, be freely accessible by the public, such as a municipal park, commons land, and greens or any part of the countryside to which the public have a right to walk.

Notices and Information

64. It is important that all notices are protected from the weather and are prominently displayed, either on a board, in an office open to the public, or other places on the site which the residents have free and reasonable access to.

65. The notices must include the most recent site licence, and the contact details of the site manager, and if different the licence holder. This should include an out of

hours contact number for emergencies, and if available an e-mail address.

66. The site owner is also required to make available certain information for inspection by residents in a prominent position on the site. That could be the site office provided it is open at reasonable times, a community room which every resident is entitled to use and which is also open at reasonable times or a notice board located at the entrance to or in a central part of the site.

67. The council should discuss and agree a suitable arrangement in respect of the display of notices and information required by Conditions 14(ii) and (iii) with the NIHE, regarding the sites provided for Travellers.

Emergency Telephone

68. The council should decide whether an emergency telephone for calling the emergency services is required, taking account of the individual characteristics of each site including appropriate availability of mobile phone coverage and reception.

Flooding

69. It is important that if a site is in an area susceptible to flooding, procedures are in place to ensure that all those on the site are alerted quickly, and that they are aware of any evacuation procedures that may be in place. A notice should be prominently displayed with all relevant information.

70. The site should be included in any emergency arrangement plans held by councils

71. Sites should consider surface water flood risk and how to mitigate any such risk. For those located within the inundation area of a Controlled Reservoir it would be advisable to have an evacuation plan in place.

72. Advice on flood risks is available from the Department for Infrastructure website: www.infrastructure-ni.gov.uk

73. It is important in those parts of the country where flooding is an issue that councils have effective liaison with the Department for Infrastructure Rivers Office for their area, as well as relevant officials across their own council. NI Water should also be

contacted.

Fire Safety Measures

74. The Northern Ireland Fire and Rescue Service website: www.nifrs.org contains a range of helpful information on fire safety and the requirements of The Fire and Rescue Services (Northern Ireland) Order 2006. This includes links to fire safety guides including a specific guide relating to fire safety for caravan site operators.

75. In applying any conditions relating to fire safety measures, the council should consider the recommendations made in the Northern Ireland Fire and Rescue Service guidance. For example at Traveller or Roma sites, NIFRS recommends that during meetings and site visits it should be emphasised that in the event of a fire the occupier should Get Out, Get the Fire and Rescue Service Out, and Stay Out, and therefore the provision of fire points, fire fighting equipment or a fire warning is not recommended.

76. The Fire and Rescue Service has a duty to provide fire safety advice to those who ask for it, although it will not carry out risk assessments.

Fire Fighting Equipment

77. Where fire points are advised in the NIFRS Fire Safety Guide for Caravan Site Operators they should be visible at all times and marked in a way that makes it obvious as to what they are. They will need to be kept clear of any obstructions at all times should they be needed in the event that a fire breaks out.

78. As of the date of publication of this document current guidance by the Northern Ireland Fire and Rescue Service is that a fire hydrant should be installed within 100m of any caravan standing and be capable of providing a flow rate of at least 1,500 litres per minute. Where a fire hydrant is not provided, or where the flow rate is insufficient, an alternative water supply may be acceptable, such as lake, pond, river, canal or a holding tank, provided it is capable of providing at least 45,000 litres of water at all times of the year, and to which access, space and a hard standing is available for a fire appliance.

79. The positioning of mains connected hydrants is the responsibility of NI Water, and any queries as to whether a site has a hydrant should be directed to them. The

positioning of the hydrants should be recorded on the site map, which will assist the emergency service in locating them in the event of an emergency.

80. The site operator may decide, for additional protection, to install other measures such as water standpipes and hose reels at each fire point. Where these are provided, the water pressure and flow should be sufficient to project a jet of water approximately 5m. The hose reel should be a minimum length of 30m and comply with the current British Standard.

81. Fire Extinguishers should only be used if there is not enough water pressure for a hose reel. Where provided, extinguishers should comply with the current British Standard.

82. The previous Model Licence Condition in respect of an emergency telephone has been modified. An emergency telephone for calling the emergency services is only required if mobile phone reception is poor. On touring caravan sites, site owners are encouraged to provide details of the nearest available telephone for contacting the emergency services on the fire notice.

Fire Warning

83. The means of raising the alarm in the event of a fire should be appropriate to the size and layout of the site. If you are unsure of which form of raising the alarm is the most suitable to the site, then refer to the NIFRS Fire Safety Guide for Caravan Site Operators.

Maintenance and Testing of Fire Fighting Equipment

84. It is important that all fire warning systems and firefighting equipment are regularly inspected and maintained. The suggestion is that these checks should be carried out on an annual basis. All testing and maintenance should be carried out by a person suitably qualified to do the work. Records should be kept of any testing and when the most recent inspections were carried out. The record of all tests and inspections should be kept on the site for inspection.

Fire Notices

85. The fire action notice should be displayed on a notice board, and at other suitable points around the site. The full address of the site, including the postcode should be included. Suggested text is available in the NIFRS Fire Safety Guide for Caravan Site Operators.

Enforcement

86. The main enforcer in respect of fire safety is the Northern Ireland Fire and Rescue Service.

Date

Angus Kerr
Chief Planner & Director of Regional Planning
Clarence Court
10-18 Adelaide Street
BELFAST
BT2 8GB

Dear Mr Kerr

RE: CONSULTATION ON NEW MODEL LICENCE CONDITIONS FOR CARAVAN SITES

On behalf of Newry, Mourne and Down District I would like to submit the following comments in relation to the Consultation on New Model Licence Conditions for Caravan Sites:

1. In paragraph (v) of Condition 10. Drainage and Sanitation, the provision of water closets to at least the scale of 1 WC and 1 urinal per 5 caravans or less for men and 2 WCs per 15 caravans or less for women is required. This provision should be per 15 caravans or less for both men and women.

2. Condition 12. Parking, refers to parking of private cars, jet skis and boats between adjoining caravan at a minimum distance of 3m from the adjoining caravan. Condition 2. Density and Spacing Between Caravans indicates that there should be 6m space between adjoining caravans. When considering the requirements of both conditions, where private cars, jet skis and boats are parked between adjoining caravans, the minimum distance between the caravans must be 6m plus the width of the private cars, jet skis or boats. This often presents a compliance issue for existing sites.

Should you have any queries in relation to this response please contact me at this department.

Yours sincerely

Eoin Devlin
Assistant Director – Health & Wellbeing
eoin.devlin@nmandd.org

Report to:	Neighbourhood (NS) Committee
Date of Meeting:	19 June 2019
Subject:	Sustainability & Climate Change Forum
Reporting Officer:	Roland Moore, Director: Neighbourhood Services (NS)
Contact Officers:	Michael Lipsett, Director: Active & Healthy Communities (AHC) Eoin Devlin, Assistant Director: Health & Wellbeing (AHC) Johnny McBride, Assistant Director: Waste Management (Acting) (NS)

For Decision	**X**	**For Noting Only**	

1.0	**Purpose and Background**
1.1	The purpose of this report is to provide, for Member approval, draft terms of reference for the establishment and operation of a Sustainability & Climate Change Forum.
2.0	**Key issues**
2.1	Sustainability and the issue of man-made Climate Change are becoming more and more important to our citizens. As a Council we have a responsibility to play our part both in how we conduct our operations but also as an exemplar to our wider District, our businesses and our citizens
2.2	It is recommended a new Elected Member forum be established to allow suitable consideration of issues relating to Sustainability, Climate Change, the Circular Economy, Strategic Waste Management, Energy Management and our Coastal environment.
2.3	Subject to the agreement of Members, this Forum will replace the work of other Working Groups and Fora that existed in the previous Council term, including: i. Sustainable Development and Climate Change Standing Forum; ii. Strategic Waste Working Group; and iii. Marine Task Force.
2.4	Members are asked to note that, due to the collaboration between the AHC and NS Directorates concerning these issues, an identical report along with terms of reference will be tabled at both Committees in June 2019.
3.0	**Recommendations**
3.1	**Members are asked to consider and agree to the recommendation to:** ▪ **Establish a Sustainability & Climate Change Forum; and** ▪ **Agree to the recommended Terms of Reference.**
4.0	**Resource implications**
4.1	There are no additional resource implications arising from the establishment of this Forum.

5.0	**Equality & Good Relations Implications**
5.1	There are no equality or good relations issues arising from this specific report.
6.0	**Rural Proofing implications**
6.1	There are no rural proofing implications arising from this specific report.
7.0	**Appendices**
	▪ **Appendix I** - draft Terms of Reference for a Sustainability & Climate Change Forum

Sustainability & Climate Change Forum

-DRAFT TERMS OF REFERENCE-

Scope

- The Sustainability and Climate Change Forum ("the Forum") shall be responsible for leading on the development and implementation of the Sustainability agenda in Newry, Mourne & Down District Council ("the Council"), including giving regard to matters of Sustainability, Climate Change, Energy Management and the strategic management of the District's waste and making appropriate recommendations to Council for action.

- It will do this by:

  i. Developing the Council's Corporate Strategy on Sustainability and Climate Change and monitoring the delivery of this strategy;

  ii. Promoting and embedding sustainability across all Council operations;

  iii. Developing Circular Economy actions including strategic actions affecting the District's waste;

  iv. Overseeing the Council's energy efficiency and renewable energy programme;

  v. Identifying measures which will have a positive impact on the Coastal environment of the District; and

  vi. Providing local representation to any relevant Marine & Coastal Fora

Membership

To ensure a single Council approach to the development and implementation of the Sustainability agenda, the Forum shall be appointed from within the membership of the Full Council.

The Forum shall be comprised of the following representatives from each of the following recognised Political Groupings on Council (Sinn Fein, SDLP, UUP; DUP and ALL / IND), as follows:

- Sinn Fein x 2 representatives
- SDLP x 2 representatives
- UUP x 1 representative
- DUP x 1 representative
- ALL / IND x 1 representative

Term

The Forum shall be established for four (4) years in accordance with the lifetime of the Full Council. Members shall be appointed to sit for the duration of this term.

Chairperson

A Chairperson shall be nominated by the Members at the first meeting to fulfil the role for a full calendar year. In the absence of the Chairperson at any subsequent meeting, the role should be appointed from the Members present.

Meetings

All Meetings of the Forum shall be governed by the Standing Orders of the Council and the Code of Conduct for Councillors.

The Forum shall meet on a quarterly basis and in accordance with a schedule of Meetings to be agreed at the inaugural Meeting.

Members of the public shall not be permitted to attend Meetings of the Forum.

Reporting

The Action sheet of the Forum will be reported at both the Active & Healthy Communities and Neighbourhood Services Committees.

Officers will prepare papers with recommendations on required actions for the consideration of the relevant Council Committee.

Agenda, Reports & Action Sheet

All agenda, reports and action sheets of the Forum shall be circulated to all forty-one (41) Members of the Council.

Officer Support

Primary officer support shall be provided by the Director of Neighbourhood Services and the Director of Active & Healthy Communities.

Additional Officer support shall be provided by other relevant Council Officers.

Report to:	Active and Healthy Community
Date of Meeting:	17 June 2019
Subject:	Carnbane Youth Pitches.
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision		**For noting only**	x

1.0	**Purpose and Background**
1.1	**Purpose** To note the report of upgrading of facilities at Carnbane mini pitches and the reinstatement of a youth soccer league in the Newry area planned for September 2019.
1.2	**Background** Newry legacy area youth soccer league ceased in 2014 due to various issues raised by local teams. Councils Sports development section have been working with local clubs, IFA and The Carnbane league to resolve this issue. The Sports Facilities Strategy has identified the necessary investment for upgrading of changing, toilet and storage facilities at Carnbane mini pitches which is planned to be in place for July 2019. The launch of a under 13 youth league is planned for September 2019 as a result of collaborative working and addressing of facility issues at Carnbane mini pitches.
2.0	**Key issues**
2.1	Local clubs are currently playing in mid ulster and Lisburn leagues due to lack of facilities and league structures within the Newry area for underage soccer. Changing, toilet and storage facilities at Carbane mini pitches are currently not fit for purpose or non-existent, creating a number of safeguarding and public amenity issues for users and spectators. IFA have insisted if a formal underage soccer league is to be launched in the area, appropriate changing and toilet provision for children and spectators within the site must be in place.
3.0	**Recommendations**
3.1	**That the Committee note the upgrading of facilities at Carnbane mini pitches and the reinstatement of a youth soccer league in the Newry area planned for September 2019.**

4.0	**Resource implications**
4.1	There are no resource implications with budget requirements accommodated within existing budgets.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified:
7.0	**Appendices**
7.1	None
8.0	**Background Documents**
8.1	None

Report to:	Active and Healthy Community
Date of Meeting:	17th June 2019
Subject:	Newry Leisure Centre (NLC) Swimming Pool Opening Times and Closure Dates.
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision		**For noting only**	**x**

1.0	**Purpose and Background**
1.1	**Purpose** To note the swimming pool opening times and closure dates for Newry Leisure Centre.
1.2	**Background** • The new swimming pool in Newry Leisure Centre opened in March 2015 and has experienced significant growth and demand for a wide variety of activities and user groups including: 1. Public Swimming (See appendix 1) 2. Swimming Tuition 3. Programmed Activities 4. Club and Group Based Bookings 5. Event Use including club and regional swimming galas. • Newry swimming pool is an 8-lane pool and is designed to be able to accommodate regional swimming competitions, attracting visitors from outside the district and therefore arguably hosting these events has a wider economical impact for the area. • Management at the centre strive to achieve a balanced programme to accommodate the demand for a wide range of activities and user groups with an annual review of these arrangements in place. • Some events such as large swimming galas require full day closures (see appendix 2). Due to the impact on the service and management striving to deliver a balanced programme, large galas have been reduced from 14 to 9 in the past 2 years. • NLC also operates full closers on designated public/bank holidays, for designated staff training days and planned preventative maintenance days (see appendix 2). When possible, these are planned to coincide with each other for efficiency and minimal disruption.
2.0	**Key issues**
2.1g	• Whilst management at the centre strive to accommodate all user demands, a balanced approach to programme delivery helps ensure that disruptions such as full closures are minimised. • The delivery of a balanced programme in the interest of the wider context

	of all users, has led to some groups and their provision unable to be fully meet. • Where possible the accommodation of exclusive use requirements for events is planned outside of the normal opening hours for the centre to minimise disruption on normal arrangements. • The centre has received an increase in complaints from members of the public in recent months due to swimming pool closures. • This year NLC was designated by the electoral office as both a polling and count station for the recent local government elections. This led to 3 days of additional full closure of NLC and a number of customer complaints. • In addition to event closures, public/bank holiday, staff training and planned preventative maintenance closures, unanticipated closures for health, safety and essential maintenance reasons also arise throughout the year.
3.0	**Recommendations**
3.1	**Purpose** To note the swimming pool opening times and full closure dates for Newry Leisure Centre.
4.0	**Resource implications**
4.1	Any changes to the current arrangements may have an impact on income and expenditure budgets.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified
7.0	**Appendices**
	• Appendix 1 Newry Leisure Centre Opening Times • Appendix 2 Newry Leisure Centre Closure Days
8.0	**Background Documents**
	None

NEWRY LEISURE CENTRE

SWIMMING POOL OPENING TIMES

	Centre Opening /Closing times	Swimming Pool (Main) and Health Suite	Swimming Pool (Learner)	Flume
Monday	6.30am -10pm	6.30am - 9.30pm	9.30am - 12.30pm 1pm - 9.30pm	4pm – 7.30pm
Tuesday	8am - 10pm	8am - 9.30pm	9.30am - 12.30pm 1pm - 9.30pm	4pm – 7.30pm
Wednesday	6.30am -10pm	6.30am - 9.30pm	9.30am - 12.30pm 1pm - 2pm 3pm - 8pm	4pm – 7.30pm
Thursday	8am - 10pm	8am - 9.30pm	9.30am - 12.30pm 1pm - 9.30pm	4pm – 7.30pm
Friday	6.30am - 10pm	6.30am - 9.30pm	9.30am - 12.30pm 1pm - 9.30pm	4pm – 7.30pm
Saturday	9am - 6pm	9am - 5.30pm	9am - 5.30pm	10am - 4.30pm
Sunday	10am - 6pm	10.30am - 5.30pm	10.30am - 5.30pm	11am - 4.30pm

Be Active...

Ag freastal ar an Dún
agus Ard Mhacha Theas
Serving Down and
South Armagh

Comhairle Ceantair
an Iúir, Mhúrn agus an Dúin
Newry, Mourne and Down
District Council

Newry Leisure Centre Swimming Pool Full Closure Day's

Public Holiday and Swimming Gala's

January – December 2019

Swimming Gala Events (Restricted to nine days per year)

6 January	Swimming Pool facilities closed
2 and 3 March	Swimming Pool facilities closed
26 May	Swimming Pool facilities closed
16 June	Swimming Pool facilities closed
*Four dates still to be confirmed	

Staff Training/Planned Preventative Maintenance (Restricted to two days per year)

13 February	
*One date still to be confirmed	

Public Holiday's

12 July	Centre closed all day
24, 25, 26 and 27 December	Centre closed
1 January	Centre Closed
17 March	Centre Closed

Report to:	Active and Healthy Community
Date of Meeting:	17th June 2019
Subject:	Sport NI Your School Your Club Funding
Reporting Officer (Including Job Title):	Paul Tamati, Assistant Director Leisure and Sport
Contact Officer (Including Job Title):	Conor Haughey, Head of Outdoor Leisure

For decision		**For noting only**	**x**

1.0	**Purpose and Background**
1.1	**Purpose** To note that Sport NI currently have a Your School Your Club funding opportunity open with 8 'Expressions of Interest' (EOI) received form the Newry, Mourne and District Area. The Council submitted 4 projects as identified in the Sports Facility Strategy and 1 project under Health and Safety. To note that Sport NI have sought 'Further Clarification' in relation to 4 submissions with the remaining 4 submissions placed on a list of future potential projects.
1.2	**Background** • Sport NI recently requested EOI for projects to be consider for 'Your School Your Club' funding programme. • The programme is aimed at Enhancing Club & Community Use of School Sports Facilities.
2.0	**Key issues**
2.1g	• The Your School Your Club funding programme is in its early stages of assessment and a decision on successful projects is not envisaged prior to the summer. • The funding scheme specifically outlines eligibility criteria for the programme (Appendix 1). • Although there is potential within the funding programme for projects to be 100% funded, match or additional funding may also be required from key partner organisations for some projects. • Councils 2019/20 Capital scheme would be limited in terms of supporting the identified projects at present. • Project costs are indicative figures only and may be subject to change prior to a detailed design and cost survey being completed.
3.0	**Recommendations**
3.1	**That the committee note the Expressions of Interest and further clarifications required for projects submitted as part of the Your school your club funding programme.**
4.0	**Resource implications**

4.1	• Additional Capital/match funding (subject to committee approval) may be required to support successful projects.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified
7.0	**Appendices**
	Appendix 1: Sport NI Guidance Notes
8.0	**Background Documents**
	None

GUIDANCE NOTE MAY 2019

Your School Your Club

Enhancing Club & Community Use of School Sports Facilities

BACKGROUND

Your School Your Club is an initiative to promote community use of school sports facilities. The opening of the school sports estate to community and club use will have a major impact on the provision of sports facilities throughout Northern Ireland. Your School Your Club seeks to develop strategic partnerships in order to revitalise existing sports facilities or to develop new/additional provision. The Your School Your Club Joint Working Group is governed by the Department for Communities (DfC); current membership includes DfC, Department for Agriculture, Environment and Rural Affairs (DAERA), District Councils, Department for Education (DE), Education Authority (EA) and Sport Northern Ireland.

INVESTMENT

Sport Northern Ireland on behalf of the Your School Your Club Working Group is seeking to establish a list of potential projects that would benefit from support and funding over the next three financial years - 2019/20, 2020/21 and 2021/22.

Sport Northern Ireland has secured capital budget of £1 million (2019/20), to assist the implementation of the outcomes envisaged by Your School Your Club. Sport Northern IrelandI hopes to bid for additional capital funds in future years.

These projects will involve schools that make their sports facilities open to the community/clubs if the appropriate sports facility infrastructure is provided. Successful projects will be predicated on the principle that schools involved are committed to making their sports facilities accessible to sports clubs/local communities subject to the provision of fit for purpose and appropriate (sports) infrastructure.

ELIGIBILITY

Potential Your School Your Club projects must meet the following eligibility criteria:

Applicant eligibility:

- Be situated in a school facility that is not listed for closure (DE/EA Area Plans);
- Should be identified within councils local area reports or;
- Identified need for the facility (e.g. Local Area Sports Report, the Community Plan, Local Development Plan, School Development Programme etc)*;
- Have commenced engagement between all stakeholders, in particular this should include the school, clubs/communities and Council.

**The Working Group would particularly welcome projects from rural areas due to facility shortage and available funding.*

Projects seeking investment in 2019/20:

- Must submit an Expression of Interest by Tuesday 11 June 2019;
- Must be able to demonstrate the following 'state of readiness' indicators:
  - Planning permission applied for or approved;
  - Tenure arrangements in place; and
  - Partnership funding in place (if appropriate/relevant).
- Deliverable by 31st March 2020 (for Year 1 projects).

Projects seeking investment in 2020/21 and 2021/22 are invited to submit an Expression of Interest as soon as the Council becomes aware of the project.

Project Type Eligibility:

Your School Your Club will consider the following project types (please note that this list is not exhaustive):

- Enhancement of a school sport facility e.g. a sports hall or tennis court surface;
- Enhancement of safety and accessibility to school facilities e.g. fencing, lighting, alarms and electronic access systems;
- **Upgrade** of school pitches* including floodlight installation (training or full sized);
- Floodlighting to existing synthetic pitches (training or full sized);

upgrade of a grass pitch to a synthetic pitch or synthetic pitch to a higher standard.

Ineligible projects:

- Small Multi-Use Games Areas (MUGAs) or play parks will not be eligible.

FUNDING THRESHOLDS

Potential funding will be considered on a project by project basis within the following parameters:

- While there is no minimum investment threshold, Sport Northern Ireland will take Value For Money and additionally into account in assessing projects;
- For larger projects partnership funding will normally be required;
- The Your School Your Club Joint Working Group is particularly interested in Expression for Interest for projects in, and/or benefitting, rural areas.

EXAMPLE PROJECTS

Example 1. Council A identifies a lack of pitches. The Council approaches School B to ask school to open their synthetic pitch to club/community use in the evenings and at the weekend, with the Council managing out of hour's usage. School agrees and an expression of interest is submitted to Your School Your School seeking funding for floodlights.

Example 2. Club C requires an indoor hall for training and games. Club C approaches School D to ask for access to their hall in the evenings and weekend. School agrees and an expression of interest is submitted to Your School Your Club seeking funding for new access doors, alarms and changing room upgrades.

EXPRESSIONS OF INTEREST

Expressions of Interest are invited from all Councils for all school projects that meet the criteria of this programme within the next 3 financial years.

To be considered in the 2019/20 financial year, an Expression of Interest should be received no later than Tuesday 11 June 2019 at 4pm.

CONTACT

Sport Northern Ireland is acting as the lead contact for the Working Group. For further information please contact:

Julie McCann
Sport Northern Ireland
E: Juliemccann@sportni.net
T: 028 9038 3205

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Update on Affordable Warmth Scheme
Reporting Officer (Including Job Title):	Eoin Devlin Assistant Director Health and Wellbeing
Contact Officer (Including Job Title):	Sinead Trainor Senior EHO (Health Improvement)

For decision		**For noting only**	**X**

1.0	**Purpose and Background**
1.1	**Purpose** To note the report.
1.2	**Background** Since 2015 the Council has been delivering the Affordable Warmth Scheme in partnership with Department for Communities and the Northern Ireland Housing Executive. The scheme is targeted at those dwellings in greatest need with some allowance for referrals. Council officers carry out the initial survey work and the Housing Executive then enable the adaptation work to be carried out. To date we have referred around 2300 addresses to the scheme.
2.0	**Key issues**
2.1	The funding offered to us to carry out the scheme in this year has been significantly reduced in line with a reduced number of monthly referrals. It has been reduced from around £68000 to £41000. We are now only required to refer 16 dwellings each month. This decrease in funding would have made it very difficult for us to maintain the staff to provide the service across our District however we have had a request from Armagh Banbridge and Craigavon BC where they would like us to use their funding to carry out surveys in that Council area also. This will allow us to maintain our current staffing levels and meet our own local targets. A Service Level Agreement will be prepared to allow this collaborative working.
3.0	**Recommendations**
3.1	That the Committee note the report.
4.0	**Resource implications**
4.1	Within existing estimates. Additional visits for Armagh Banbridge and Craigavon BC will be fully funded

5.0	**Equality and good relations implications**
5.1	No equality impact assessment is required at this time
6.0	**Rural Proofing implications**
6.1	Officers confirm due regard to rural needs has been considered
7.0	**Appendices**
7.1	None
8.0	**Background Documents**
	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Newry Neighbourhood Renewal Partnership (NRP) Report
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director Community Engagement
Contact Officer (Including Job Title):	Damien Brannigan, Head of Engagement

For decision		**For noting only**	**X**

1.0	**Purpose and Background**
1.1	**Purpose** To note the report. To note the attached Minutes of the Newry Neighbourhood Renewal Partnership (NRP) Meeting listed in 3.1 below.
1.2	**Background** The following information is provided to update the Committee on the on-going work of the Newry NRP: **Southern Health and Social Care Trust (SH&SCT) Health Programmes:** • 5 health and wellbeing programmes held during January and February. • 4 visits of the Action Cancer Bus in the period January to March – Carnagat and Greater Linenhall area in January, Ballybot in February and the final visit to Drumalane/Quayside in March. • Healthy eating programmes in partnership with Education Authority NI – 8 schools participating – awaiting the evaluations. • 'The Daily Mile Initiative in Primary Schools' – supporting an increase in physical activity – delivered through SH&SCT physical activity coordinator. • Information circulated on Recovery and Wellness College – addressing mental health and wellbeing – currently being delivered in WIN Business Park. • Abdominal Aortic Aneurysm (AAA) Screening in John Mitchel Place. • 6 week 'Cook it Programme' to be delivered in Carnagat. • Smoking cessation – leaflet drop in NR areas – 5 referrals. **Southern Regional College (SRC) Employability Programmes:** **> TOPS (Training Opportunities Programme):** • Monitoring visit completed with Deirdre McCann (Department for Communities) • All targets met on time and within budget. • Programmes almost completed – TOPS will finish in 4 weeks. • High demand for HGV, Forklift Truck and Door Security training. • Request an Economic group meeting with the Community Associations. **> OCEANS (Employability Training Programme for Maritime Industry)**: • Training in the NMCI (National Maritime College of Ireland) in Cork for 6 days and covers Security Awareness, Elementary First Aid, Fire Fighting, Personal Survival, Social Responsibilities and Working at Heights. • 2 days training in SRC campus covers career development and manual handling. • 95% pass rate.

	Newry & Mourne Enterprise Agency E2E (Education to Employment) Programme: • Career pathway event in the Omniplex Newry on 29 November 2018 – 410 pupils attended – very positive feedback from students and teaching staff. • Mock interviews carried out for 20 St Mary's High School Newry students. • All P7 pupils to attend study visits before end of March. • Codor dojo programme to be delivered through February and March. • Programme on target to meet all outputs. **Education Authority NI (EANI) Education Programme:** • All programmes running - Count Read Succeed Programme plus Mentoring Programme and Parenting Programme. • Youth engagement – some applications reassessed – failed to meet criteria. • Newry Intercommunity project - focus on mental health – workshops in Town Hall followed by silent walk to Newry market – stalls/information stands/food/music. • Homework Club (Out of school learning) in Drumalane/Quayside - commenced in November 2018. **Education Authority NI (EANI) Capital project.** • The Bosco fencing and field upgrade – await report from EANI maintenance team. • Kieran Shields (EANI) to report back to NR Partnership Members. **Newry, Mourne & Down District Council Outdoor Activity Programme**: • To date all 9 groups have received support plus 3 community user groups, 4 youth programmes, the Supporting People and Communities Everyday (SPACE) project and the Polish Supplementary School based in St Joseph's High School Newry. • 1685 people participated – with 1220 hours of volunteering generated - 39 activities took place. • All outputs/targets met and all within budget and on time. **Newry, Mourne & Down District Council Community Renewal Programme:** • Meeting all targets and on course to spend the budget. • No issues. • Barcroft AGM took place – some new people elected onto the committee. • Carnagat AGM planned for February. **Newry, Mourne & Down District Council Capital projects:** • Meadow Armagh Road toilet block – site meeting with Council took place – await report from plumbers after they complete dye testing to confirm the existing foul and storm drainage site. **Northern Ireland Housing Executive Capital Projects:** • **Drumalane Environmental Improvement scheme** – Application is with Department for Communities (DfC) - letter of delegated responsibility confirming new signatory also completed. • **Carnagat extension –** Application for revenue to acquire technical support is now with DfC. • Karen Gracey (DfC) has advised that currently there is no additional revenue or capital money available at this time. This can change – look at priorities going forward plus smaller schemes that can be delivered quickly. •
2.0	**Key issues**
2.1	None.

3.0	**Recommendations**
3.1	**That the Committee:-** • **Note the report.** • **Note the attached Minutes of the Newry NRP Meeting held on Wednesday 16 January 2019, which were approved at the Newry NRP Meeting held on Wednesday 20 March 2019.**
4.0	**Resource implications**
4.1	Support and assistance from partners to deliver actions in the Minutes and Action Plan attached.
5.0	**Equality and Good Relations implications**
5.1	No Equality of Opportunity or Good Relations adverse impact is anticipated. Should have a positive impact on Equality of Opportunity and Good Relations.
6.0	**Rural Proofing implications**
6.1	There are no negative implications identified. The work of Newry NRP is statutorily restricted to the nine Neighbourhood Renewal areas of Newry City.
7.0	**Appendices**
7.1	Appendix I: Minutes of Newry NRP Meeting on Wednesday 16 January 2019.
8.0	**Background Documents**
8.1	None.

Department for Communities
www.communities-ni.gov.uk

Comhairle Ceantair an Iúir, Mhúrn agus an Dúin
Newry, Mourne and Down District Council

Minutes of the Newry NR Partnership Meeting
Wednesday 16th January 2019
At 7.00pm
WIN Business Park, Newry

In Attendance:

Mrs Geraldine Merendino	Ballybot CA (Chairperson)
Ms Karen Gracey	Development Manager DfC
Mr Sean Mc Kevitt	NM&DDC
Ms Aisling Rennick	NM&DDC
Mr David Vint	SRC
Mr Raymond Jackson	CCG
Mr Collie Hanna	Barcroft CA
Mr Richard Kimmins	Barcroft CA
Ms Ruth Allen	SHSCT Promoting Wellbeing team
Mr James Treanor	Carnagat CA
Mrs Paula Mc Guigan	Carnagat CA
Mr Gerard Hutchinson	Drumalane Quayside Close CA
Mrs Bridie Hughes	Drumalane Quayside Close CA
Ms Kathleen Lowry	Greater Linenhall Area CA
Mr Owen McDonnell	NIHE
Mrs Sinead Jennings	Ballybot CA
Mrs Deirdre Murtagh	Ballybot CAS
Mrs Maureen Ruddy	Martins lane CA
Ms Francine Ruddy	Martins lane CA
Ms Noreen Rice	MARCA
Ms Maeve Mc Parland	E2E project
Dr Conor Patterson	NMEA
Mrs Madaleine Mc Crink	SHSCT Promoting Wellbeing team
Mr Colin Morley	Carnagat CA

Apologies:

Mrs Barbara O'Hare	Ballybot CA
Mrs Deirdre Murtagh	Ballybot CA
Mr Brendan Cranney	MARCA
Dr Kieran Shields	Education Authority N.I

Matters Discussed

1. Welcome & Introductions
2. Apologies
3. Minutes / Matters Arising
4. Conflict of Interest
5. Programme updates
6. AOB
7. Date and time of next meeting

ITEM	SUBJECT	MATTERS ARISING/UPDATE	ACTIONS	By Whom
1	**Welcome**	Geraldine welcomed everyone to the meeting and wished everyone a very happy New year On behalf of the partnership Geraldine offered her sincere Condolences to Cathy Keenan and her family on the bereavement of her sister shorty before Christmas. Also to Darren Thompson whose sister sadly passed away this morning.		

2.	**Apologies**	Recorded as above.		
3.	**Minutes and matters arising**	Minutes agreed as accurate and proposed by Mr David Vint Seconded by Ms Noreen Rice All monitoring visits have taken place – all targets have been met		
4.	**Conflict of Interest**	No Conflicts of Interest declared		
5.	**Project updates**	**Health programme** • 5 health and wellbeing programmes during January and February • 4 visits of the Action Cancer Bus – planned for period January – March – Carnagat and Greater Linenhall Area in January, Ballybot in February and the final visit in Drumalane quayside in March • Healthy eating programmes in partnership with EA – 8 schools participating – await the evaluations • 'The Daily Mile Initiative in Primary schoos' – supporting an increase in physical activity – delivered through Trust physical activity coordinator • Information circulated on: Recovery and Wellness College – addressing mental health and wellbeing – currently being delivered in WIN business Park AAA Screening 6 wk 'Cook it programme' to be delivered in Carnagat Smoking cessation – leaflet drop in NR areas – 5 referrals		

		E2E project: • Career pathway event in the Omniplex – 29th November 2018 – 410 pupils attended – very positive feedback from students and teaching staff • Mock interviews carried out for 20 St Marys high school students • All P7 pupils to attend study visits before end of March • Codor dojo to be delivered through February and March Programme on target to meet all outputs **SRC employability programmes** **TOPS** to date – Monitoring visit completed with Deirdre McCann All targets met – on time and within budget Programmes almost completed – TOPS will finish in 4 weeks. OCEANS now complete – 95% pass rate High demand for HGV, Forklift truck and door security training Ask to set up Economic group meeting with the CA's **Education Programme** All programmes running Youth engagement – applications reassessed. Intercommunity project - focus on Mental health – workshop in Town hall followed by silent walk to Newry market – stalls/information stands/food/music. Homework club (Out of school learning) in Drumalane/Quayside - Commenced in November **Education Authority Capital project.** The Bosco fencing and field upgrade – await report from maintenance team Kieran to report back to members	Arrange a meeting with SRC and CA's	Sean

		Sean McKevitt gave an overview – NM&DDC programmes **Outdoor activity**: To date all 9 groups have received support + 3 community user groups and 4 youth programmes plus the SPACE project and the Polish supplementary school based in St Joseph's high school Newry. 1685 people participated – with 1220 hours of volunteering generated - 39 activities took place. All outputs/targets met – all within budget and on time **Community Renewal** Meeting all targets and on course to spend the budget No Issues Barcroft AGM took place – some new people elected onto the committee. Carnagat AGM planned for February Discussion on the reporting of outputs/numbers attending – issue of double counting in some areas Make people aware of this. Sometimes the reporting targets are misleading – during the monitoring visits this was discussed and we are amending some elements to try and avoid this. **Capital projects** **NIHE projects** **Drumalane EI scheme –** the application with DfC - letter of delegated responsibility confirming new signatory completed **Carnagat extension –** Application for revenue to acquire technical support is now with DfC Karen added that currently there was no additional revenue or capital money available at this time. This can change – look at priorities going forward plus smaller schemes that can be delivered quickly		

		Currently no decisions regarding future funding – await information in relation to all projects moving forward. Raymond asked Karen to be aware that staff are now on protected notice – if decisions are made to inform Council and others to reduce anxiety. **Council Capital projects** MARCA toilet block – site meeting with Council took place – await report from plumbers after they complete dye testing to confirm the existing foul and storm drainage site.		
6.	**A.O. B**	Issue of non-attendance at NRP meetings – ask coordinator to make contact with the groups to give a reason for non-attendance – The SLA dictates that all NR reps attend meetings. No more business All members thanked for attending Thank NMEA and Sean for the hospitality	Contact the groups	Sean
7.	**Date and time of next meeting**	20th March 2019 in WIN Business Centre Commences at 7.00pm	Circulate details	Sean

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Policing & Community Safety Partnership (PCSP) Report
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director Community Engagement
Contact Officer (Including Job Title):	Damien Brannigan, Head of Engagement

For decision		**For noting only**	**X**

1.0	**Purpose and Background**
1.1	**Purpose** • To note the report. • To note the attached Minutes of the Policing Committee Meetings and PCSP Meetings listed in 3.1 below.
1.2	**Background** The attached Minutes of the Policing Committee Meetings and PCSP Meetings listed in 3.1 below are provided to update the Committee on the on-going work of the PCSP.
2.0	**Key issues**
2.1	None.
3.0	**Recommendations**
3.1	**That the Committee:-** • **Note the report.** • **Note the following Policing Committee and PCSP Minutes as attached:** ➢ **Minutes of the Policing Committee Meeting held on Tuesday 22 January 2019, approved at the Policing Committee Meeting on Tuesday 19 March 2019.** ➢ **Minutes of the PCSP Meeting held on Tuesday 22 January 2019, approved at the PCSP Meeting on Tuesday 19 March 2019.** ➢ **Minutes of the Policing Committee Meeting held on Tuesday 19 March 2019, approved at the Policing Committee Meeting on Tuesday 28 May 2019.** ➢ **Minutes of the PCSP Meeting held on Tuesday 19 March 2019, approved at the PCSP Meeting on Tuesday 28 May 2019.**
4.0	**Resource implications**
4.1	All actions are budgeted for in the PCSP Action Plan.
5.0	**Equality and Good Relations implications**
5.1	No Equality of Opportunity or Good Relations adverse impact is anticipated. Should have a positive impact on Equality of Opportunity and Good Relations.
6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered.

7.0	**Appendices**
7.1	Appendix I: Minutes of Policing Committee Meeting on Tuesday 22 January 2019. Appendix 2: Minutes of PCSP Meeting on Tuesday 22 January 2019. Appendix 3: Minutes of Policing Committee Meeting on Tuesday 19 March 2019. Appendix 4: Minutes of PCSP Meeting on Tuesday 19 March 2019.
8.0	**Background Documents**
8.1	None.

POLICING AND COMMUNITY SAFETY PARTNERSHIP

Minutes of the Policing & Community Safety Partnership Meeting of Newry, Mourne and Down District Council held in the Boardroom, Council Offices, Monaghan Row, Newry on Tuesday 22 January 2019 at 7:00pm

---

Present:

Ruth Allen, SH&SCT
Councillor T Andrews
Sergeant Sam Ballard, PSNI
Audrey Byrne, Independent Member
Cllr William Clarke, NMDDC
Inspector Lynne Corbette, PSNI
Inspector Darren Hardy, PSNI
Michael Heaney, Youth Justice Agency
District Commander Jane Humphries, PSNI
Una Kelly, Independent Member
Cllr Michael Larkin, NMDDC
Cllr Kate Loughran, NMDDC
Ewan Morgan, Independent Member
Kerri Morrow, DEA Coordinator
Jude McNeill, Independent Member
Grace McQuiston, Independent Member
Rod O'Hare, NI Fire & Rescue Service
Sergeant Des O'Sullivan, PSNI
Cllr Brian Quinn, NMDDC
Cllr Michael Ruane, NMDDC
Cllr Michael Savage, NMDDC
Fiona Stephens, Independent Member (Chair)
Inspector Russell Vogan, PSNI
Donna Weir, Education Authority, NI

Also in attendance:

Damien Brannigan, Head of Engagement
Dan McEvoy, PCSP Manager (temp)
Martina Flynn, Safer Communities & Good Relations Manager
Judith Thompson, PCSP Officer
Alexandra Hillis, PCSP Officer
Patricia McKeever, Democratic Services Officer

1 Apologies and Chairperson's Remarks

Apologies were received from Roisin Leckey, David Patterson and Declan Murphy.

In the absence of Councillor Burgess, Ms F Stephens as Vice Chair, chaired the Meeting. Ms Stephens welcomed all to the meeting, and welcomed Councillor Walker onto the PCSP and Policing Committees acknowledging he would be replacing Councillor Harvey.

2 Minutes of PCSP Committee Meeting held on 13 November 2018

Read: Minutes of PCSP Committee Meeting held on 13 November 2018 (copy circulated)

Agreed: On the proposal of Ms U Kelly, seconded by Councillor Savage it was agreed to approve the Minutes of the PCSP Committee Meeting as a true and accurate record.

3 Matters Arising – Action Sheet dated 13 November 2018

Ms Kelly referred to Item 13 of the Action Sheet – Investigation into moving CCTV camera outside St Patrick's Centre. She said June 2019 was a long time to wait for Council to produce a report and for there to be no progress on this issue. Mr McEvoy replied that Council was not in a position to move forward with this until the report had been produced and he assured Ms Kelly that whilst CCTV remained a top priority for Council, only maintenance and repair work to existing CCTVs would be carried out in the interim. Ms Kelly asked that her comments be noted.

4 Declarations of Interest

There were no declarations of interest.

5 Adoption of Standing Orders

Read: Report by Mr D McEvoy dated 22 January 2019 regarding Adoption of Standing Orders. (copy circulated).

Councillor Clarke asked that the word 'Chairman' be replaced by 'Chairperson' throughout the document.

Agreed: The word 'Chairman' to be replaced by 'Chairperson' in the Draft Standing Orders document.

6 Adoption of 2017/18 PCSP Annual Report

Read: Report by Mr D McEvoy dated 22 January 2019, regarding Adoption of Draft PCSP Annual Report 2017/18 (copy circulated).

Agreed: On the proposal of Councillor Andrews seconded by Ms A Byrne, it was agreed to approve the Draft PCSP Annual Report for the period 2017/18.

7 Proposal to Establish a Funding Sub Group

Read: Report by Mr D McEvoy, dated 22 January 2019 regarding the Proposal to Establish a Funding Sub Group (copy circulated).

Discussion took place regarding the function of the monitoring role within the proposed Funding Sub Group. Mr McEvoy advised this role would not infringe on how the Programmes Unit currently worked but would work alongside it and would look at how groups were spending the monies allocated to them. Mr McEvoy continued, saying the current maximum grant per group was £750. Councillor Clarke asked if the Funding Sub Group could identify other funding streams, Mr McEvoy said whilst the group could direct other groups to additional funding streams if it was aware of any, it would not be directly involved in other funding streams.

It was agreed the following Members would sit on the Funding Sub Group:
Cllr B Quinn SDLP, Cllr W Walker DUP, Ms A Byrne Independent, Ms G McQuiston Independent and Ms U Kelly Independent.

Mr McEvoy said he would email remaining parties to get their nominations, he also invited nominations from members of the Statutory Bodies attending the meeting.

Agreed: To form a Funding Sub Group as per the Officer Report.

8 ASB Sub Group Report

Read: Report by Mr McEvoy, dated 22 January 2019, regarding ASB Sub Group (copy circulated).

Agreed: On the proposal of Councillor Andrews seconded by Ms A Byrne, it was agreed to approve the Draft Minutes of the ASB Sub Group Meeting held on 11 December 2018.

9 Bonfire Sub Group Report

Read: Report by Mr McEvoy, dated 22 January 2019, regarding Bonfire Sub Group (copy circulated).

Agreed: On the proposal of Councillor Andrews, seconded by Councillor Clarke it was agreed to approve the Draft Minutes of the Bonfire Sub Group meeting held on 19 November 2018.

10 Proposed dates for remaining meetings in 2019/20

Ms McQuiston asked that an item be put on the agenda for the next meeting to ascertain if all Members were content to continue with the bi monthly meetings. Mr McEvoy to look at the feasibility of changing the July meeting from 23rd to the 30th.

Agreed: On the proposal of Ms G McQuiston seconded by Inspector R Vogan it was agreed the agenda for next PCSP Meeting should include an item regarding continuing the PCSP and Policing Committee Meetings on a bi monthly basis.

Mr McEvoy to look at the feasibility of changing the July 2019 meeting from 23rd July to the 30th July and update Members.

To proceed with the bi-monthly meeting schedule as per the Officer Report.

11 Officers Report

Read: Officers Report by Mr D McEvoy, dated 22 January 2019 (copy circulated).

Agreed: It was agreed to 'note' the Officers Report.

12 Home Secure and Good Morning Report: October 2018 – December 2018

Read: Report by Mr D McEvoy, dated 22 January 2019, regarding the Home Secure (Locks and Bolts) and Good Morning / Good Neighbour Report 1 October – 31 December 2018. (copy circulated)

Mr McEvoy advised the scheme had been advertised in a local paper by one of the Members and was proving to be very beneficial, he continued, saying the scheme would be widely promoted by all relevant parties including the Statutory Bodies.

Agreed: It was agreed to note the Home Secure and Good Morning Report: October 2018 – December 2018.

13 PEACE IV PCSP Update

Read: PEACE IV PCSP Update Report by Mr McEvoy, dated 22 January 2019 (copy circulated).

Agreed: It was agreed to 'note' the PEACE IV PCSP Update Report.

14 DEA Co-ordinator's Report

Read: DEA Co-ordinator's Report by Ms K Morrow dated 22 January 2019

Agreed: It was agreed to 'note' the DEA Co-ordinator's Report.

15 PCSP Members Information

Read:
1. Department of Justice Public Consultation exercise – Stalking – A Serious Concern
2. PCSP Winter 2018/19 Newsletter
3. ARCS Funding Success: Life changes Lives.

Mr McEvoy encouraged Members to make a response to the DoJ Public Consultation and said it was great to hear that a local group in Downpatrick had been awarded £144k ARCS funding over a three year period. He said this was a great boost for the group and

said he hoped to get some media coverage for the group by arranging a photo call with the PCSP Chairperson.

16 AOB

Mr McEvoy reminded Members the closing date for the Gillen Review was 25 January and he urged all to participate either via the online survey or by phone.

17 Date of Next Meeting

The next PCSP Committee Meeting is scheduled for Tuesday 19 March 2019 at 7pm in the Mourne Room, Downshire.

There being no further business, the meeting concluded at 7.50 pm.

POLICING COMMITTEE

Minutes of Policing Committee of Newry, Mourne and Down District Council held in the Boardroom, Monaghan Row, Newry on 22 January 2019 at 6:00pm

---

In attendance:

Cllr T Andrews, NMDDC
Cllr R Burgess, NMDDC **(Chair)**
Audrey Byrne, Independent Member
Councillor W Clarke, NMDDC
Ms Martina Flynn,
Una Kelly, Independent Member
Councillor M Larkin
Councillor K Loughran
Councillor B Quinn
Cllr Michael Ruane, NMDDC
Councillor M Savage, NMDDC
Fiona Stephens, Independent Member
Jude McNeill, Independent Member
Grace McQuiston, Independent Member
Councillor W Walker, NMDDC
District Commander Jane Humphries, PSNI
Chief Inspector Joe McMinn, PSNI
Inspector Lynne Corbette, PSNI
Inspector Russell Vogan, PSNI
Inspector Darren Hardy, PSNI
Inspector Nigel Henry, PSNI
Inspector Des O'Sullivan, PSNI
Sergeant Sam Ballard, PSNI

Also in attendance:

Damien Brannigan, Head of Engagement
Dan McEvoy, PCSP Manager (temp)
Martina Flynn (PCSP Manager)
Patricia McKeever, Democratic Services Officer

1. Apologies and Chairman's Remarks

Apologies were received from Roisin Leckey, David Patterson and Declan Murphy.

Councillor Burgess, welcomed all to the meeting, and welcomed Councillor Walker onto the PCSP Policing Committee acknowledging he would be replacing Councillor Harvey. Councillor Burgess then asked that Councillor Harvey's input and assistance be noted in the Minutes. Councillor Clarke asked that a letter be sent to Councillor Harvey thanking him for his contribution to the PCSP Policing Committee during the past three years.

Councillor Burgess confirmed that Martina Flynn had been appointed as the new Safer Communities and Good Relations Manager (PCSP Manager), Martina is to assume her post on 11 February 2019 and Councillor Burgess wished her well. Councillor Burgess thanked Dan McEvoy for fulfilling the Manager role on a temporary basis for the past six months and helping to keep the PCSP on track.

Councillor Burgess advised Members that another very successful NHW Network event had been held recently in Newry and two guest speakers had spoken on the Public Protection Arrangements in N. Ireland and Action on Elder Abuse.

Councillor Burgess referred to a PSNI Public Protection presentation that had previously been agreed to be delivered at the next PCSP Policing meeting and asked for a proposer and seconder if Members were still happy to proceed.

Agreed: **On the proposal of Councillor Clarke seconded by Councillor Andrews it was agreed a letter be sent to Councillor Harvey thanking him for his input to the PCSP and Policing Committees over the past three years.**

On the proposal of Councillor Quinn seconded by Ms Kelly, it was agreed to invite Officers from the PSNI Public Protection Unit to the next Policing Committee Meeting to deliver a 15 minute presentation on PSNI Public Protection followed by a 30 minute Question and Answer Session.

2. Minutes of Policing Committee Meeting held on 13 November 2018

Read: Minutes of Policing Committee Meeting held on 13 November 2018 (copy circulated)

Agreed: **On the proposal of Councillor Savage, seconded by Grace McQuiston it was agreed to approve the Minutes of the Policing Committee Meeting as a true and accurate record.**

3. Matters Arising

There were no Matters Arising.

4. Declarations of Interest

There were no Declarations of Interest.

The Chairperson advised that a videographer would be filming the meeting for the PCSP, however there would be no sound recorded.

5. District Commander's Report - Period 4

Read: District Commander Report – 22 January 2019 (copy circulated)

Superintendent Jane Humphries presented the District Commander's report to the Committee.

Councillor Quinn asked if a breakdown on the use of mobile phones in relation to road safety issues could be circulated to the Committee.

Superintendent Humphries said she would endeavour to get this information to Mr McEvoy prior to the next Committee Meeting.

Councillor Walker referred to ASB in the Downpatrick and Rowallane areas and conveyed thanks to both the PSNI and the PCSP for a recent meeting that had been held. He acknowledged funding that had been granted to run a programme in the area which he said would prove very beneficial.

Councillor Andrews thanked the PSNI for their continued support. He acknowledged the good work carried out by the ASB Subgroup and asked if the initiative could be extended to include the Rowallane area saying other areas in the district could benefit.

In response, Mr McEvoy said the ASB Subgroup dealt with all areas across the district and Members could raise issues pertaining to any area, he said this could be discussed at the next ASB Sub Group meeting.

Councillor Savage asked for an update on the RAPID bins saying he understood the Leisure Centre may be designated as the location for Newry. Mr McEvoy said this had not yet been agreed and there were implications to be considered before this could happen. He continued, saying proper procedures would have to be followed in terms of it being agreed and adopted at Council Meetings and that Council owned property would only be used as a last resort if appropriate and duly considered according to Council procedures.

Ms Kelly said it was not very encouraging if Council were seen to be delaying on approving Newry Leisure Centre as an appointed site.

Mr Brannigan advised that due process must be followed and he said he would follow this up and report back to the Committee as appropriate.

Councillor Clarke welcomed the recent drugs seizure that had taken place in the Burrendale Estate and asked that the PSNI continue to monitor the estate as drug dealing was still on going. He said a resident had recently contacted a local newspaper to report the finding of 30 syringes that had been discarded and he asked how these should be disposed of. Superintendent Humphries replied that any pharmacy would be equipped to safely dispose of discarded syringes in sharps boxes.

Ewan Morgan acknowledged the on-going work of statutory groups and the community groups in relation to domestic abuse in the Ballybot area.

6. Draft Local Policing Plan 2019/2020

It was unanimously agreed that Superintendent Humphries proceed with the Policing Plan.

7. Date of Next Meeting

It was agreed the date of the next meeting would be Tuesday 19 March 2019 at 6pm in the Downshire civic Centre, Downpatrick.

8. AOB

Ms U Kelly asked that sympathies be passed on to the family of Robert Robinson who had tragically lost his life recently while walking on the Mourne Mountains.

There being no further business, the meeting concluded at 6.40pm.

POLICING AND COMMUNITY SAFETY PARTNERSHIP

Minutes of the Policing & Community Safety Partnership Meeting of Newry, Mourne and Down District Council held in the Mourne Room, Council Offices, Downshire, on Tuesday 19 March 2019 at 7:00pm

---

Present:

Una Kelly, Independent Member
Declan Murphy, Independent Member
Jude McNeill, Independent Member
Grace McQuiston, Independent Member
Fiona Stephens, Independent Member
Councillor T Andrews, NMDDC
Councillor R Burgess, NMDDC **(Chair)**
Councillor W Clarke, NMDDC
Councillor M Larkin, NMDDC
Councillor K Loughran, NMDDC
Councillor B Quinn, NMDDC
Councillor Michael Ruane, NMDDC
Councillor W Walker, NMDDC
Chief Inspector Joe McMinn, PSNI
Inspector Russell Vogan, PSNI
Inspector Darren Hardy, PSNI
Sergeant Des O'Sullivan, PSNI
Wendy Osborne, NI Policing Board
Shauna Rodgers, Dept of Justice
Michael Heaney, Youth Justice Agency
Loma Wilson, NI Housing Executive

Also in attendance:

Janine Hillen, Asst. Director, Community Engagement
Damien Brannigan, Head of Engagement
Martina Flynn, Safer Communities & Good Relations Manager
Dan McEvoy, PCSP Officer
Patricia McKeever, Democratic Services Officer

Due to the late finish of the Policing Committee Meeting, the PCSP Committee Meeting did not commence until 7.40pm.

1 Apologies and Chairperson's Remarks

Apologies were received from Audrey Byrne and Councillor Savage.

2 Minutes of PCSP Committee Meeting held on 22 January 2019

Read: Minutes of PCSP Committee Meeting held on 22 January 2019 (copy circulated)

Councillor Andrews said he had been in attendance at the PCSP Meeting on 22 January 2019, and he asked that the Minutes be amended to reflect this.

Agreed: **On the proposal of Councillor Ruane, seconded by Councillor Clarke it was agreed to approve the Minutes of the PCSP Committee Meeting as a true and accurate record subject to the above amendment being made.**

3 Matters Arising – Action Sheet dated 22 January 2019

There were no matters arising.

Agreed: **It was agreed to note the Action Sheet.**

4 Declarations of Interest

There were no declarations of interest.

5 Update from PSNI on implications of, and preparations for, Brexit in relation to Policing in Newry, Mourne and Down.

Read: Report by Superintendent Jane Humphries, dated 19 March 2019 regarding implications of, and preparations for, the European Union Exit (Brexit) in relation to policing in Newry, Mourne and Down. (copy circulated).

Chief Inspector McMinn said plans had been put in place whether Brexit went ahead or not, and specialist bodies had been set up to look at infrastructure implications if required. In response to a query from a Councillor Andrews as to some motor insurance companies currently advising that green cards may be required, Chief Inspector McMinn said this would not be the case.

Agreed: **It was agreed to note the PSNI report on the European Union Exit.**

6 Department of Justice Targeted Consultation to review the Code of Practice for the Appointment of Independent Members to Policing and Community Safety Partnerships (PCSPs) and District Policing and Community Safety Partnerships (DPCSPs)

Read: Report by Ms M Flynn dated 19 March 2019, regarding the Department of Justice Targeted Consultation to review the Code of Practice for the Appointment of Independent Members to Policing and Community Safety Partnerships (PCSPs) and District Policing and Community Safety Partnerships (DPCSPs) (copy circulated).

Agreed: **On the proposal of Councillor Ruane seconded by Councillor Doran, it was agreed to:**

- **Approve the PCSP response to this consultation.**

7 Newry, Mourne & Down PCSP Action Plan 2019/20

Read: Report by Ms M Flynn, dated 19 March 2019 regarding the Newry, Mourne & Down PCSP Action Plan 2019/20 (copy circulated).

Agreed: On the proposal of Councillor Andrews, seconded by Councillor Quinn, the following was agreed:

- **To approve the updated Newry, Mourne & Down Action Plan 2019/20 as submitted to the Joint Committee on 3 March 2019**
- **To approve the proposed increase in funding for the following:**
  - **Grant funding for community driven local safety projects (proposed revised allocation £53,060). Increased allocation of £15,000.**
  - **Provision of the Home Secure Scheme (proposed revised allocation £35,000). Increased allocation of £10,000.**

8 Update on Multi-Agency Support Hub

Read: Report by Ms M Flynn, dated 19 March 2019, regarding Update on Multi-Agency Support Hub (copy circulated).

Agreed: On the proposal of Councillor Andrews seconded by Councillor Clarke, it was agreed to:

- **Approve the Update on Multi-Agency Support Hub report**
- **Approve PCSP involvement in the Multi-Agency Support Hub in the Newry, Mourne and Down District.**

9 ASB Sub Group Report

Read: Report by Ms M Flynn, dated 19 March 2019, regarding ASB Sub Group Report (copy circulated).

Agreed: On the proposal of Councillor Doran, seconded by Councillor Clarke it was agreed to note the Draft Minutes of the ASB Sub Group Meeting held on 13 February 2019 and to agree recommendations arising from the draft Minutes.

10 Review of bi-monthly PCSP Meetings

Read: Report by Ms M Flynn, dated 19 March 2019, regarding the Review of Policing Committee and PCSP Committee bi-monthly meeting schedule

Agreed: On the proposal of Councillor Ruane seconded by Councillor Doran it was agreed to continue the scheduling of Policing Committee and PCSP Committee meetings on a bi-monthly basis as per the revised 2019/2020 bi-monthly meeting dates below-

- **28 May 2019**
- **30 July 2019**
- **18 September 2019 (NB – Wednesday)**
- **19 November 2019**
- **21 January 2020**
- **10 March 2020**

11 Proposal for PSNI Engagement Vehicle

Read: Report by Ms M Flynn, dated 19 March 2019 regarding Proposal for PSNI Engagement Vehicle. (copy circulated).

Agreed: It was agreed to 'note' the Officers Report in relation to the proposal for the PSNI Engagement Vehicle.

12 Officer's Report

Read: Officer's Report by Ms M Flynn, dated 19 March 2019 (copy circulated)

Agreed: It was agreed to note the Officer's Report.

13 PEACE IV PCSP Update

Read: Report by Ms M Flynn, dated 19 March 2019 regarding PEACE IV PCSP Update. (copy circulated).

Agreed: It was agreed to 'note' the PEACE IV PCSP Update Report.

14 DEA Co-ordinator's Report

Read: DEA Co-ordinator's Report by Ms K Morrow dated 19 March 2019

Agreed: It was agreed to 'note' the DEA Co-ordinator's Report.

15 PCSP Members Information

Read: Report by Ms M Flynn, dated 19 March 2019, regarding PCSP Members Information (copy circulated).

Read: 1. Appointment of Independent Members
2. Policing and Community Safety Awards 2019

Agreed: It was agreed to 'note' the PCSP Members Information Report.

16 Date of Next Meeting

The next PCSP Committee Meeting is scheduled for Tuesday 28 May 2019 at 7pm in the Boardroom, Monaghan Row, Newry.

There being no further business, the meeting concluded at 8.00 pm.

POLICING COMMITTEE

Minutes of Policing Committee of Newry, Mourne and Down District Council held in the Mourne Room, Council Offices, Downshire Civic Centre, Downpatrick on 19 March 2019 at 6:00pm

---

In attendance:

Una Kelly, Independent Member
Jude McNeill, Independent Member
Grace McQuiston, Independent Member
Fiona Stephens, Independent Member
Councillor T Andrews, NMDDC
Councillor R Burgess, NMDDC **(Chair)**
Councillor W Clarke, NMDDC
Councillor M Larkin, NMDDC
Councillor K Loughran, NMDDC
Councillor B Quinn, NMDDC
Councillor M Ruane, NMDDC
Councillor W Walker, NMDDC
Chief Inspector Joe McMinn, PSNI
Inspector Russell Vogan, PSNI
Inspector Darren Hardy, PSNI
Sergeant Des O'Sullivan, PSNI
Ailish McCrissican, PSNI Public Protection Unit
Gary McDonald, PSNI Public Protection Unit
Wendy Osborne, NI Policing Board
Shauna Rodgers, Dept of Justice

Also in attendance:

Janine Hillen, Asst. Director – Community Engagement
Damien Brannigan, Head of Engagement
Martina Flynn, Safer Communities & Good Relations Manager
Dan McEvoy, PCSP Officer
Patricia McKeever, Democratic Services Officer

1. Apologies and Chairman's Remarks

Apologies were received from Audrey Byrne and Councillor Savage.

Councillor Burgess welcomed all to the meeting, and welcomed Wendy Osborne from the NI Policing Board and Shauna Rogers from the Department of Justice.

Councillor Burgess confirmed the meeting would be the last full partnership meeting until after the local government elections in early May and therefore his last meeting as the PCSP Chairperson.

Councillor Burgess asked that his thanks to all elected representatives for their contributions and input throughout the year be noted, he acknowledged the independent members would be in post for a further 12 months and he thanked them for their continued support. Councillor Burgess then advised Members that the competition to recruit new PCSP Independent Members had now opened, and further information was available from the NI Policing Board.

Councillor Burgess advised he had attended the official launch of the 'No Lost Cause' programme in Downpatrick on 8 February 2019. He said the organisation 'Life Change: Changes Lives' had successfully applied for and been awarded £145K ARCS funding which would cover their project up until March 2021. Councillor Burgess continued, saying that the PCSP had supported the ARCS application and would act as project supervisors during the project's lifespan.

Councillor Burgess referred to videography that had taken place at the January 2019 Policing Meeting and said the various clips and video images had been compiled into a promotional video for NM&D PCSP, he encouraged all members to view and share the video as widely as possible as it provided an excellent insight into the work within the PCSP.

2. Minutes of Policing Committee Meeting held on 22 January 2019

Read: Minutes of Policing Committee Meeting held on 22 January 2019 (copy circulated)

Agreed: On the proposal of Councillor Andrews, seconded by Councillor Quinn it was agreed to approve the Minutes of the Policing Committee Meeting as a true and accurate record.

3. Matters Arising

There were no Matters Arising.

4. Declarations of Interest

There were no Declarations of Interest.

5. PSNI Public Protection Unit Presentation

The Chairman welcomed Ailish McCrissican and Gary McDonald and invited them to deliver their presentation.

In introducing the presentation, Mr McDonald thanked Members for the opportunity to present at the meeting and said the presentation would give a broad overview of the work undertaken by the PSNI Public Protection Branch. In advance of showing the video presentation, he advised Members the video contained some disturbing content

including interviews relating to child abuse, domestic abuse, rape crime and online abuse.

Following the presentation there was a question and answer session and the following points were raised:

- There were five Public Protection teams working throughout N.Ireland.
- Effective partnerships with strong visible links were critical for success.
- Highly trained personnel were working alongside partners in an effort to keep people safe and bring to justice those responsible for crimes.
- There was a small increase in the numbers of rape related crime, however PSNI considered this was as a result of increased reporting rather than increased crime.
- PSNI acknowledged there was still under reporting, however, they said there was additional support offered to victims in the early stages which resulted in more people coming forward.
- PSNI agreed to put warning messages out on social media regarding those who made threatening remarks against people reporting crimes.
- There was guaranteed anonymity for anyone coming forward to report rape crime.
- 'Without Consent' presentation had been delivered in schools throughout the district throughout the current school term and this could be extended to include next term.
- 'No Grey Zone' was a video that had been made available on social media forums.
- Mr McDonald to make enquiries if there were any plans to roll out further educational programmes to the young people of the district and report back.
- It was important to reach as wide an audience as possible in terms of education, and in addition to schools, church groups and cultural groups could be targeted.
- Electronic briefing had been conducted, education in this area was key regarding the electronic transfer of indecent images.
- There should be an onus on social media sites such as Facebook and Instagram to take responsibility in policing the content on their sites.

AGREED: **Mr McDonald, PSNI to report back to Committee regarding the roll out of further educational programmes to young people in the district.**

The Chairman thanked Mr McDonald and Ms McCrissican for their very informative presentation.

6. District Commander's Report – Period 1

Read: District Commander Report – 19 March 2019 (copy circulated)

Chief Inspector Joe McMinn presented the District Commander's report to the Committee.

Following the presentation, discussion took place and the following points were raised:

- There were still concerns regarding ASB and drug use in the Rowallane area.
- Efforts had been made by Councillor Walker to reopen the youth club in Killyleagh as he believed the presence of the youth club had been key in keeping young people out of trouble.
- Inspector Hardy referred to the Active Sports Initiative saying it had had a positive effect in Killyleagh and he said he would look at this and report back.
- Rowallane DEA is lobbying the Department of Education to try to get a full time Youth Worker for the Rowallane area.
- ASB and drug use was rife in the Kilkeel area and was getting worse. Local people were living in fear and no longer reporting incidents as they believed nothing was being done by PSNI.
- PSNI confirmed there was ongoing work in relation to alleged drug dealers in Kilkeel.
- PSNI took on board the comments regarding the exacerbation of ASB and drug crime and said there would be an increased profile in the Kilkeel area.
- The recent incident of a police car having been burned out in Kilkeel had served to reinforce offenders' belief they were beyond the justice system.
- The PSNI had replaced the burned out car, however, this resulted in £40K budget being diverted from dealing with ASB and drug related crimes.
- The level of ASB and drug crimes was so bad in the Kilkeel area that families who had lived in the area for over 30 years were moving away.
- The use of driving whilst on mobile phones was an ongoing issue in the Kilkeel area, however the PSNI could not take any action unless the perpetrators were caught at the time.
- Chief Inspector McMinn said it was critical for people to contact them when they witnessed offences being committed.
- There was evidence of ASB in the Saintfield, Killyleagh and Crossgar area, education with young people was key in tackling this.
- There was one Hate Crime event per district which took the form of a Q&A session.
- PCSP were liaising with local businesses in investigating suitable sites in the Newry area for the location of Rapid Bins that would be accessible 24/7.
- Some Members indicated their frustration at the lack of progress in securing locations for the Rapid Bins. Mr. Brannigan sought to reassure Members that progress was being made in relation to siting RAPID Bins and that Officers would update Members on this progress as soon as they were in a position to disclose details.
- A letter should be sent from the PCSP to the Chief Executive of NMDDC requesting that the installation of RAPID bins on or at Council facilities be considered according to appropriate Council protocol.
- PSNI confirmed there was no disparity in the community engagement across the district and future District Commander Reports would reflect this.
- PSNI to investigate incidents of stoning cars on the Shimna Road in Newcastle and children as young as 10 years old being involved in ASB in the area.

- There was a need to be proactive in the approach to curbing ASB at the 2019 Blues on the Bay Festival.
- PSNI said an engagement meeting regarding the Blues on the Bay Festival could be organised to discuss best approach in an effort to reduce the level of ASB.
- Concern was expressed regarding the ASB in the Rowallane area and the feasibility of a mobile police station, PSNI said if a suitable venue could be identified, a mobile clinic could be held on a weekly or fortnightly basis. Councillor Burgess to raise this at the next Community Group Meeting.

AGREED: On the proposal of Councillor Walker, seconded by Ms U Kelly, it was agreed that a letter be sent from the PCSP to the Chief Executive of NMDDC requesting that the installation of RAPID bins on or at Council facilities be considered according to appropriate Council protocol.

Inspector Hardy to report back to Committee on the Active Sports Initiative that had taken place in Killyleagh.

PSNI to investigate incidents of stoning cars and young people involved in ASB on the Shimna Road in Newcastle.

An engagement meeting to be scheduled with PSNI in advance of the Blues on the Bay Festival to discuss best approach.

7. Date of Next Meeting

It was agreed the date of the next meeting would be Tuesday 28 May 2019 at 6pm in the Boardroom, Monaghan Row.

There being no further business, the meeting concluded at 7.35pm.

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17th June 2019
Subject:	2019 / 2020 DfC Areas at Risk Funding for Bessbrook and Crossmaglen
Reporting Officer (Including Job Title):	Janine Hillen Assistant Director Community Engagement
Contact Officer (Including Job Title):	Julie McCann Head of Community Services, Facilities and Events

For decision		**For noting only**	x

1.0	**Purpose and Background**
1.1	Purpose To note the report.
1.2	**Background** Newry, Mourne and Down District Council have secured £48,000 (£24,00 per centre) to run community educational programmes in Crossmaglen and Bessbrook Community Centres as part of The Department for Communities (DfC) Areas at Risk Programme.
2.0	**Key issues**
2.1	This programme assists with meeting the Councils corporate objectives by empowering and improving the capacity of our communities. Educational Programmes will include certificate level courses and vocational classes. A requirement of the Letter of Offer is that Council will submit quarterly progress reports and financial claims. In the last financial year, a wide range of activities took place, participation targets were met, and the full amount of grant aid has been claimed.
3.0	**Recommendations**
3.1	**That the Committee not funding received from the Department for Communities for the roll out of the Areas at Risk Programme in Bessbrook & Crossmaglen Community Centres (£24,000 per area).**
4.0	**Resource implications**
4.1	Officers time in relation to organising tutors, registration and processing claims in relation to this project.
5.0	**Equality and good relations implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated
6.0	**Rural Proofing implications**
6.1	A rural Needs Impact Assessment is not required at this time

7.0	**Appendices**
7.1	None
8.0	**Background Documents**
8.1	None

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	**South Armagh/South Down Peace Centre**
Reporting Officer (Including Job Title):	Janine Hillen, Assistant Director: Community Engagement
Contact Officer (Including Job Title):	Justyna McCabe, Head of Programmes

For decision		**For noting only**	x

1.0	**Purpose and Background**
1.1	**Purpose** To note the report.
1.2	**Background** The application to SEUPB for the South Armagh/South Down Peace Centre was submitted in June 2018. This application was considered by the Steering Committee at its meeting on 12th /13thDecember and was rejected as it did not meet the required thresholds.
2.0	**Key issues**
2.1	A request for review of the Steering Committee's decision was submitted on 21 February 2019 on the grounds that: • There was a failure in adherence to procedures or systems that materially affected or could affected the decision; • The outcome was a decision that no reasonable person would have made on the basis of the information provided to the Steering Committee. The Review Panel met on Friday 29 March 2019 and the application was considered on both grounds. The Review Panel determined that the Steering Committee's decision not to approve the application should be upheld.
3.0	**Recommendations**
3.1	**That the Committee note the report.**
4.0	**Resource implications**
4.1	None.
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.

6.0	**Rural Proofing implications**
6.1	Due regard to rural needs has been considered.
7.0	**Appendices**
7.1	None
8.0	**Background Documents**
8.1	None

Report to:	Active and Healthy Communities
Subject:	Scheme of Delegation Report
Date:	17 June 2019
Reporting Officer:	Michael Lipsett, Director of Active and Healthy Communities
Contact Officer:	Michael Lipsett, Director of Active and Healthy Communities

For decision		**For noting only**	x

1.0	**Purpose and Background**
1.1	**Purpose** To note the decisions and authorisations contained in the attached schedules.
1.2	**Background** Attached is a schedule of decisions and authorisations delegated to Michael Lipsett, Director of Active and Health Communities under the following categories: - 1. Engaging consultancy assistance below the delegated level of £2,000; 2. Decision to commence formal restructuring within a Department or Departments; 3. Consultation responses other than technical responses where officers asked for Members' views: 4. Decisions arising from external report on significant Health and Safety at Work; 5. In cases of emergency, the allocation or awarding of Financial Assistance to external groups or organisations below the delegated level of £300; and 6. Other decisions such as those with political media or industrial relations implications that Directors consider Members should be aware of.
2.0	**Key Issues**
2.1	None
3.0	**Recommendation**
3.1	**That the Committee note the report.**
4.0	**Resource Implications**
4.1	None
5.0	**Equality and Good Relations Implications**
5.1	No equality or opportunity or good relations adverse impact is anticipated.

6.0	**Rural Proofing Implications**
6.1	Officers confirm due regard to rural needs has been considered
7.0	**Appendices**
7.1	Appendix 1: Scheme of Delegations Lists
8.0	**Background Documents**
8.1	None

SCHEME OF DELEGATION [USE OF COUNCIL LAND]

The following were approved:-			
Applicant	Council Land Requested/Details of Event	Dates	Fee Waived/Paid.Discounted
Ballybot Community Association Funday	Use of Raymond McCreesh Park to host a family fund day (2 days)	26 August 2018 & 30 September 2018	Fee Waived
Down Leisure Centre	Discount for Down Special Olympics for hire of facilities	7 September 2018 – 28 June 2019	free of charge for a 2 hour booking and additional usage outside the agreement will be charged full rates
Respect Project (Street Football Programme)	Greenfield/Carnagat/Derrybeg/Barcroft/Whitegates/ Drumlane/O'Neill Avenue	10 & 11 November 2018	Paid
Ballynahinch Community Collective	Use of the Square, Ballynahinch and newly tarmacadam area adjacent to Windmill Street Car Park for the Ballynahinch Harvest Fair	28 & 29 September 2018	Fee Waived
Ardglass Golf Club	Meadow Playing Fields, Ardglass for use as a car park for golf club members during the British Girls Amateur Open Golf	11 – 19 August 2018	Fee Waived
Tracy McStay	Use of Newry Leisure Centre Main Pool from 9.00 am to 9.00 pm for a Fundraiser	Fridays tbc	Fee Waived
Community Services Health	Bridge Centre ,Killyleagh for a 12 week educational and physical programme for adults 16+.	20 September 2018 for 12 weeks	Fee Waived

JUNE 2019

SCHEME OF DELEGATION [USE OF COUNCIL LAND]

Applicant	Council Land Requested/Details of Event	Dates	Fee Waived/Paid Discounted
Ballynahinch RBL	Use of the Market Square for a Milltara Fair and WW1 Commemoration	10 & 11 November 2018	Paid
Shimna Wheelers	Donard Park for Car parking for Round 6 of the Ulster Cyclocross Series and use of the pavilion	04-Nov-18	Fee Waived
Mourne Gospel Fellowship	Learner Pool and Main Hall at Kilkeel LC	11-Nov-18	Fee to be paid
Castlewellan GAC	Use of Pitch at Bann Road, Castlewellan for a charity 7-a-side tournament	13-Oct-18	Fee Waived
Cedar Integrated PS	Car Park at Kilmore Pitches for drop of at 9.00 am and pick ups at 3.00 pm	during school term	Fee Waived
Kilkeel Chamber of Commerce	Kilkeel Bowling Pavilion for the Hallow Lights Festival + community fireworks display	27-Oct-18	Fee Waived
Down GAA	Use of Newry Tennis Courts Car Park for parking for Down GAA Football Championship final match	14/10/2018	Fee Waived
Phoenix Natural Gas	Market Square for public information event	27/10/2018	Fee Waived
Newry Hospice	Newry LC for Bucket Collection	10/11/2018	n/a
CSE Events	Newcastle Centre - Auditorium and upstairs café for a tattoo convention	14-16 June 2019	Fee to be paid
Choice Housing	The Square, Ballynahinch - Action Cancer Big Bus	09-Mar-19	Fee Waived
PIPS Hope and Support	Use of Clonallon Park for a colour run Fundraiser	24-Nov-18	Fee Waived
South Armagh Educaton Authority Youth Service	Drumgorley Park for Colour Run for Ellen Appeal	08-Dec-18	Fee Waived
Ballynahinch Community Collective	Use of the Square Ballynahinch for Christmas Lights Switch on	07/12/2018	Fee Waived
BBC	Car Park at the side of Kilkeel LC for Filming a Thriller	19-Feb-19	Fee to be paid
Air Ambulance NI	Newcastle Centre – Plaza for fundraising	22-Jun-19	Fee Waived
Ulster Bank	Castle Park, Newcastle - 24 hour licence for Mobile Banking	Thursdays	£300 PA Rental

JUNE 2019

SCHEME OF DELEGATION [USE OF COUNCIL LAND]

Applicant	Council Land Requested/Details of Event	Dates	Fee Waived/Paid Discounted
Newcastle Chamber of Commerce and Charles Hurst Motorbikes	Newcastle Centre – Plaza for a charity event	16/06/2019	Fee Waived
PSNI	Mourne Esplanade Kilkeel - Cross Community Event	29/06/2019	Fee Waived
The Edge Community Centre	Ballynahinch Market House and Square for a Spring Fair	13/04/19	Fee to be paid
South Eastern Regional College	Use of Dunleath Playing Fields for an "It's a Knock Out Event"	29-Mar-19	Reduced rate
Newry Mitchells	Use of Derryleckagh Playing Fields for hosting Annual All Ireland Blitz	31 May to 1 June 2019	Fee Waived
Thomas Leavy - Journey Community Church	Use of Dunleath Playing Fields for Community Fun Event	22-Apr-19	Fee Payable
NADAFL	Use of Kilmore Playing Fields (pitch 2)	6 May to 17 May 2019	Fee Waived
Newcastle Centre	Use of Plaza outside the front of Newcastle Centre	19-May-19	Fee Waived
Ashgrove Rovers Football Club	Carnbane Your Pitches for Youth Football Tournament	11-May-19	Fee Waived
Rossglass County	Use of Dunleath Pitch for Charity Football Match	18-May-19	Fee Waived

SCHEME OF DELEGATION: APPROVAL TO COMMENCE PROCUREMENT AND BUSINESS CASES

Proposed Purchase/Business Case	Details	Expenditure
Approval to Commence Procurement - Develop a Training Programme	Under the PEACE IV LAP in Diversity and Good Relations	£15,000
Approval to Commence Procurement - Refurbishment of Kitchen areas in Cloughreagh CC and Bessbrook CC	To modernise and bring up to spec the facilities within each centre	Up to £15,000
Approval to Commence Procurement - Ballykinlar Community Centre Permieter Fencing	Provide fencing to secure the site in advance of the delivery of the Ballykinlar Community Facility	£23,500
Business Case	Peace IV Shared History & Culture Programme	£35,000
Business Case	Car Park Extension, Kilmore Playing Fields	£70,000
Business Case	Install new Play Park Signage	£120,000 over 3 years
Business Case	Replacement of signage at each Community Centre	£20,000
Business Case	Remedial Works At Mullaghbane CC	£46,500
Business Case	Peace IV Children and Young People Programme	£82,675
Approval to Commence Procurement	PEACE IV Shared History and Culture Programme	Grant of £28,000
Approval to Commence Procurement	Joint Departmental Procurement for De-Fibrillators for Leisure, Sport, Community Engagement and Tourism	£27,000

June 2019

SCHEME OF DELEGATION: APPROVAL TO COMMENCE PROCUREMENT AND BUSINESS CASES

Proposed Purchase/Business Case	Details	Expenditure
Approval to Commence Procurement	PEACE IV BPR 3 OCN Accredited Civic Leadership Programme for Women	Grant of £29,500
Approval to Commence Procurement	PEACE IV Action - International Study Visit to Krakow under the Civic Leadership Programme	Funding of £20,000
Approval to Commence Procurement	Portable Toilet Block	£29,750
Approval to Commence Procurement	Cavity Wall Extraction, Cavity Wall Insultation and loft insulation at Hilltown CC	£7,000
Business Case	Replacement of Heating System at Ballynahinch CC	Estimated cost of £69,336

SCHEME OF DELEGATION [SLAs MoUs Licence Agreements]

Details	Project	Comments
Licence Agreement	Maintenance of an area of lands at Heather Park, Newry	3 September 2018
Service Level Agreement	Representatives from the Carnbane Leabue	To regulate the season long hire charge and usage of soccer pitches/pavilions within NMD for both Senior and Youth Football
Service Level Agreement	Windmill Stars FC	To regulate the season long hire charge and usage of Derryleckagh (Willie Davis) pitch within NMD for both Senior and Youth Football
Facility Management Agreement	Meigh Community Association	3 April 2018
Service Work Quotation	Phoenix Gas	DLC, 114 Market Street, Downpatrick
Easement	Phoenix Gas	Newcastle
Contract Cancellation	Café Newry LC	Resignation of current café vendor and approval to commence procurement process
Contract to purchase new Leisure Equipment	Down LC	12/09/18
Service Level Agreement	NMD and Aughlisnafin GAC	2091/20
Wayleave Agreement	Lands at Camlough Road, Newry	Northern Ireland Electricity 30/01/19
Wayleave Agreement	Clanrye Avenye, Newry	Northern Ireland Electricity 30/01/19
Wayleave Agreement	Lands at the Meadow and Armagh Road CC, Newry	Northern Ireland Electricity 30/01/19
Service Level Agreement	Irish Football Association - Football Development Programme	01/04/19 - 31/03/20
Contract/Lease Agreement	Warrenpoint Town FC	2018/19 Lease agreement from 2/12/12 – 1/12/34
Wayleave Agreement	Lands at Carbane Industrial Estate	Northern Ireland Electricity 1/12/18
Wayleave Agreement	Clanrye Avenye, Newry	Northern Ireland Electricity
Audit Trail		SEUPB

JUNE 2019

SCHEME OF DELEGATION [SLAs MoUs Licence Agreements]

Details	Project	Comments
Wayleave Agreement	Kittys Road, Kilkeel	Northern Ireland Electricity
Land Access Agreement	Newry FAS - NLC	Department of Infrastructure
Agreement for St Colman's Pitch	Ballynahinch Hockey Club	
Service Level Agreement	Carnbane Football League	Use of Facilities 2019 to 2020

SCHEME OF DELEGATION [ENFORCEMENT & LICENCING]

Applicant	Details	Additional Comments
	Tobacco Control Officer Experience Log/Authorisation Document	9 August 2018
Superdrug, Buttercrane Centre, Newry	Registration of person to carry on Business of Ear and Body Piercing	9/08/18
GiGi McQueen, Newcastle	Registration certificate/licence for tattooing and body piercing	18/09/18
GiGi McQueen, Newcastle	Tattooing	04/01/2019
	Tobacco Control Officer Experience Log/Authorisation Document	07/11/2018
Donna Trainor	Ear Piercing	19/12/2018
	Non Compliance with an Abatement Notice issued under Section 63(1) (e) of the Clean Neighbourhoods and Environment Act (NI) 2011	Legal Proceedings pending
Ryan McManus	Registration of person to carry on Business of Tattooing	17/04/2019
Environmental Health Officers x 8	Authoristion in respect of Houses in Multiple Occupation Act (NI) 2016	16/05/2019 for 3 years

SCHEME OF DELEGATION [EXPENDITURE APPROVALS/STAs]

Proposed Purchase	Details	Amount
Employment of a consultant using the NEPRO framework	Community Facilities Strategy	£12,000
Attendance at Play Symposium in Cardiff x 2	Attendance at event for Conor Haughey and Kieran Gordon	£205.12
Black Boxes for 23 Council owned Community Centres	Black Boxes with equipment are necessary if the Centres are asked to be open in the event of an emergency	£3450 (23x £150)
Samsung Tablet	For the launch of the NMD Be Active Facebook page and opening of DLC	£199 per centre
Down Leisure Centre, Newry Leisure Centre and Kilkeel Leisure Centre	Vouchers for Charity Event 1x child 20 Swim Card	£34.20
Down Leisure Centre, Newry Leisure Centre, Kilkeel Leisure Centre and Bllymote Centre	Vouchers for one month Gym membership for Daisyhill Hospital Maternity Ward Biggest Loser Challenge	£29.95
Down Leisure Centre, Newry Leisure Centre and Kilkeel Leisure Centre	1x child 20 swim card for Annalong Hooley Chairman's Request	£34.20
Down Leisure Centre, Newry Leisure Centre and Kilkeel Leisure Centre	80 Complimentary Swim Vouchers for Cabra School Chairman's Request	£192
Indoor Leisure	Vouchers for 1x 20 swim for Our Lady and St Patrick's PS, Downptrick	£45.50
Indoor Leisure	Vouchers for 1x 20 swim for Academy PS, Downptrick	£45.50
Indoor Leisure	Vouchers for 1x 20 swim for Downpatrick PS, Downptrick	£45.50

JUNE 2019

SCHEME OF DELEGATION [EXPENDITURE APPROVALS/STAs]

Proposed Purchase	Details	Amount
Kilkeel HS	Use of weekly gym and swim session at a reduced rate for senior pupils	Use of gym & swim at £3.80
Down High Sporting Association	Indoor Leisure Facilities eg 2x tickets for Free Month All Inclusive Membership for 1 year for a raffle	Fee waived
Indoor Leisure	1x 20 Swim Card Voucher for St Patrick's Loughinisland GAA club	£45.50
NIHE	Acquisition of land at Bunkers Hill, Castlewellan	£3,000
PCSP	Funding a shortfall to allow the delivery of the International Exchange Trip element of the PCSP/PEACE IV project	£9,750
Community Engagement	Replacement of Defribrillators in all six centres	£9,000
Damolly FC	Payment towards outstanding water bills for use of Shandon Park Playing Fields during remedial works	£300
Indoor Leisure	3x Family Swim Vouchers for St Patrick's PS Legamaddy	£27.90
Community Engagement	Ballyholland CC - Fixed electrical wiring and emergency lighting inspection	£500
Indoor Leisure	STA/NCA for replacement of bollards with uplighters at NLC front entrance	£5,848.44

JUNE 2019

SCHEME OF DELEGATION [EXPENDITURE APPROVALS/STAs]

Proposed Purchase	Details	Amount
Community Engagement	STA/NCA for Provision of ITEC Level 2 Certificate in Make-uP by Younique College	£2,660
Community Engagement	STA/NCA for Education Course Provider Barista Training at SRC	£2,690
Indoor Leisure	Replacement of moving Floor operator control system with a new HMI operator panel at Kilkeel LC	£14,760
Indoor Leisure	Donations to Newry Swimming Club Fundraising Event on 26/04/19	1x20 Swim Card at £46.90 and 1x 10 Swim, Steam and Sauna Card at £47.40
Indoor Leisure	Family Vouchers under Southern Trust Parenting Partnership for Years Autism	2x 20 Swim Card at £46.90
Indoor Leisure	Sports Development Team in partnership with Social Services	1x20 Swim Voucher at a cost of £45.50
Indoor Leisure	Additional Non Specific works in DLC offices	£6,190.57
Indoor Leisure	Ultra Lemon Cleaning Product used in all Leisure Centres	£5,000 per order approx 182 drums

SCHEME OF DELEGATION [CHANGE TO FACILITIES/CHARGES]

Details	Date of Event	Comments
Indoor Leisure	Course discount by 25% from scale of charges – STA Course -	Summer 2018
Down Leisure Centre, Newry Leisure Centre and Kilkeel Leisure Centre	Vouchers for Charity Event 1x child 20 Swim Card	£34.20 August 2018
Down Leisure Centre, Newry Leisure Centre, Kilkeel Leisure Centre and Bllymote Centre	Vouchers for one month Gym membership for Daisyhill Hospital Maternity Ward Biggest Loser Challenge	£29.95 August 2018
Down Leisure Centre, Newry Leisure Centre and Kilkeel Leisure Centre	1x child 20 swim card for Annalong Hooley Chairman's Request	£34.20 August 2018
Down Leisure Centre, Newry Leisure Centre and Kilkeel Leisure Centre	80 Complimentary Swim Vouchers for Cabra School Chairman's Request	£192 August 2018
Environmental Health	Air Quality Station in Market Street, Downpatrick	Full price £12,000 but Council will recoup £6,000
Messages Card Shop, Newry	Carry out Improvement Works to the shop front	August 2018
Lecale Swimming Club	Change to Swimming opening times to facilitate Lecale Swimming Club Galas	6 October 2018
Lecale Swimming Club	Change to Swimming opening times to facilitate Lecale Swimming Club Galas 26/01/19	26-Jan-19
Kilkeel LC	Public Closure to faciltiate staff training	06-Dec-18
Lecale Swimming Club	Change to Public Opening Times to facilitate Lecal Swimming Club Aqua Sprints	Additional dates - 23/02/19 & 13/04/19
Indoor Leisure Facilities	Closure of Indoor Leisure Facilities on 17/03/19 and approval to open facilities on on the bank holiday on 18/03/19	18/03/2019
Indoor Leisure	Closure of Newry LC to facilitate Swim Ulster and Newry Swim Club Galas on various dates in 2019	06/01/19, 02/03/19, 03/03/19, 26/05/19, 07/06/19 & 16/06/19

JUNE 2019

SCHEME OF DELEGATION [CHANGE TO FACILITIES/CHARGES]

Details	Date of Event	Comments
Indoor Leisure	Closure of Newry LC for Training Day	13/02/2019
Indoor Leisure	Closure of KLC, NLC, DLC, Newcastle, Ballymote and St Colmans	on Friday 12 and Saturday 13th July 2019
Indoor Leisure	Closure of NLC for LG Elections	2, 3 and 4 May 2019

SCHEME OF DELEGATION (Funding/Contract/Tenders/Claims/LOOS

Details of Funding/Applicant etc	Amount/Details	Additional Details
Teconnaught FC	Extension to their project	until 31/03/19
Newry Rugby FC	Extension letter	from 30/10/18 to 31/12/18
Craobh an Iuir Gaelaras	Extension letter	from 20/06/18 to 31/12/18
Kilcoo CC	Issue payment to Kilcoo GAC & allow them to draw down up to 80% of the project budget	01/11/2018
Ardglass CC Project	Extension letter	from 31/03/19 - 30/04/19
Thomas Davis GFC	Extension letter	from 31/03/19 to 27/07/19
Kilclief Ben Dearg	Extension letter	until 1/07/19
Liatroim Fontenoys	Extension letter	from 31/03/19 to 31/07/19
St Mary's GFC	Extension letter	from 31/03/19 to 31/12/19
Altnaveigh House Trust Project	Extension letter	from 31/03/19 to 30/09/19
Crossgar War Memorial Hall Project	Extension letter	from 31/03/19 to 31/05/19
Peadar O'Doirnin GAA Project	Extension letter	from 31/03/19 to 31/05/19
Teconnaught FC	Extension letter	from 31/03/19 to 30/06/19
Castlewellan Town FC Project	Extension letter	from 31/03/19 to 31/03/20
The Schomberg Society Minor Grants for Community Centres Project	Extension letter	from 31/03/19 to 30/06/19
Loughinisland GAC Project	Extension letter	from 31/07/18 to 20/12/18
Peadar O'Doirnin GAA Project	Extension letter	from 31/10/18 to 31/03/19
MacMillan Cancer Support	Grant Extension for Funding for the Macmillan Move More Co-ordinator and Non Standard Grant ref: 6254183	or 13 months until 31/12/21
Kilcief Ben Dearg	Extension letter	until 31/03/19

SCHEME OF DELEGATION (Funding/Contract/Tenders/Claims/LOOS

Details of Funding/Applicant etc	Amount/Details	Additional Details
Sustainable Tree Projects	100% advance payment	2018
NIE	Acceptance of Terms & Conditions for the provision of a connection at DLC in the amount of £2552.30	02/04/2019
Ballyhornan & District CA	Extension letter	from 31 March 2019 to 31 July 2019
Heart of Down Project	Extension letter	from 31 March 2019 to 30 June 2019
The Schomberg Society Minor Grants for Community Centres Project	Extension letter	from 30 June 2019 to 30 September 2019
Crossgar War Memorial Hall Project	Extension letter	from 31 May 2019 to 31 August 2019
Ardglass CC Project	Extension letter	from 31 May 2019 to 30 June 2019
Ballykinlar CC	Reestablish building - Tender Package	17/05/2019

Report to:	Active and Healthy Communities Committee
Date of Meeting:	17 June 2019
Subject:	Terms of Reference for Committee and Working Groups
Reporting Officer (Including Job Title):	Michael Lipsett Director of Active and Healthy Communities
Contact Officer (Including Job Title):	Janine Hillen, Assistant Director of Community Engagement Eoin Devlin, Assistant Director of Health and Wellbeing Paul Tamati, Assistant Director of Leisure and Sports

For decision		**For noting only**	**x**

1.0	**Purpose and Background**
1.1	**Purpose** To note the Terms of reference for AHC Committee and its Working Groups.
1.2	**Background** The Terms of Reference for AHC Committee and its Working Groups are attached in Appendices 1-6.
2.0	**Key issues**
2.1	The Terms of reference for all Committees were agreed at Strategy Policy and Resources Committee on 14 March 2019 and adopted by Council on 1 April 2019.
3.0	**Recommendations**
3.1	**That the Committee note the Terms of Reference for the AHC Committee and its Working Groups.**
4.0	**Resource implications**
4.1	None
5.0	**Equality and good relations implications**
5.1	The Council will have due regard to the need to promote equality of opportunity between the nine equality categories. Council will also seek to promote Good Relations between people of different Religious Belief, Political opinion and Ethnic Origin.
6.0	**Rural Proofing implications**
6.1	Officers confirm due regard to rural needs has been considered;
7.0	**Appendices**
	Appendix 1: ToR for AHC Appendix 2: ToR for Fairtrade Steering Group Appendix 3: ToR for Newry and Mourne Travellers' Forum Appendix 4: ToR for Peace IV Partnership Appendix 5: ToR for SANDSA Appendix 6: ToR for Newry, Mourne and Down Health For a (South and South Eastern Areas)

8.0	Background Documents
	None

ACTIVE AND HEALTHY COMMUNITIES COMMITTEE

-TERMS OF REFERENCE-

Scope

The **Active and Healthy Communities Committee** ("the Committee") will be responsible for improving the health, wellbeing and social cohesiveness of the District's communities.

Responsibilities

- Lead on the improvement of health outcomes and the facilitation of healthy lifestyles through leisure and sporting provision and through health promotion and prevention policies.
- Lead on the development and implementation of suitable strategies, policies and programmes for environmental protection and management; sustainability and climate change; energy management, biodiversity and environmental education.
- Provision of environmental health services, including public health and safety.
- Tackle disadvantage and building active, engaged and responsible citizenship through the provision and support of community services, facilities and events.
- Implementation of the Council's Good Relations programmes.
- Improving social and community cohesion through effective community relations and development of the financial assistance programme.
- Managing and overseeing local structures for Policing and Community Safety Partnership (PCSP).
- Lead the development, implementation and ongoing management of the 7 District Electoral Area (DEA) Fora.
- Lead on the development and implementation of suitable strategies, policies and programmes for community health, wellbeing and social cohesiveness.
- Ensure the design and delivery of Council functions and services are accessible to all citizens.
- Responsible for sports development, including leisure and sporting programmes and facilities.
- Responsible for parks and open spaces, including playing fields and playgrounds.
- Leading on issues relating to outdoor recreation.

- Approved by SPR – 14th March 2019.
- Approved at Council – 1st April 2019
- Terms of Reference shall be kept under review to ensure they remain appropriate annually. A full review of Council's Committee structures, and the corresponding Terms of Reference will be undertaken within the first 3 months of a new Council. Review of Terms of Reference shall be undertaken by the Council.

- Responsible for the management and implementation of Peace IV European Commission Project and other European Projects linked to Social Inclusion and Social Investment Fund.

- The effective stewardship of delegated responsibilities for the District's resources and assets (financial, people and property based) for environmental protection and services, well-being, social cohesiveness and community engagement and leisure.

Membership

The Committee is comprised of fifteen (15) Elected Members appointed to the Committee at the Council's Annual Meeting.

Quorum

No business shall be transacted unless at least 4 Members are present.

Chairperson

The Committee Chairperson and Deputy Chairperson shall be appointed at the Council's Annual Meeting in accordance with the Local Government Act (NI) 2014.

Meetings

All meetings of the Committee shall be governed by the Council's Standing Orders and the Northern Ireland Code of Conduct for Councillors. A timetable of meetings shall be agreed annually by the Council.

Sub-Committee and Working Groups

The Committee has the power to establish and appoint any number of Sub-Committees, Task and Finish Working Groups, Project Boards and Forums, as are necessary to consider in more detail the work of the Committee.

Communications and Reporting

The Minutes of the Committee shall be tabled at each meeting of the Council, in accordance with the Council's Standing Orders.

Declarations of Interest

A Declaration of Interests Register will be kept for all Committee Members. Each Member should take responsibility to declare proactively any potential conflict of interest arising out of business undertaken by the Council.

- Approved by SPR – 14th March 2019.
- Approved at Council – 1st April 2019
- Terms of Reference shall be kept under review to ensure they remain appropriate annually. A full review of Council's Committee structures, and the corresponding Terms of Reference will be undertaken within the first 3 months of a new Council. Review of Terms of Reference shall be undertaken by the Council.

Newry, Mourne and Down Council Fairtrade Steering Group
Terms of Reference

Objectives

- To promote the concept of Fairtrade and increase the availability of Fairtrade products within Newry, Mourne and Down District Council area
- To raise awareness of the FAIRTRADE Mark
- To attain Fairtrade District status for Newry, Mourne and Down Council area, Fairtrade City status for Newry and Fairtrade Town status for Downpatrick, Newcastle, Saintfield and Warrenpoint with continued commitment and drive, by achieving the five criteria of a Fairtrade District as set out in the Fairtrade Foundation's 'Fairtrade Town Goals and Action Guide'
- To encourage workplaces, businesses, schools, universities and places of worship to work to promote and use Fairtrade products
- To play its role collectively in the regional campaign of making Northern Ireland a Fairtrade devolved region: www.northernirelandfairtrade.org

Activities

In order to achieve the above objectives, the Group will:

- Organise and deliver events during Fairtrade Fortnight in February/March each year
- Be responsible ensuring the area is meeting the five criteria of Fairtrade status for Organise ongoing events to increase public awareness of and participation in Fairtrade
- Maintain a strong relationship with the local press and other media to ensure that the campaign retains a high profile

Membership

Membership is open to all those who have expressed a commitment to promoting Fairtrade in Newry, Mourne and Down District Council area.

This includes: elected representatives, council staff, charities, voluntary or community associations, non-governmental organisations (NGOs), higher educational institutions, schools, churches/places of worship, businesses and private individuals.

Secretariat

Secretariat support for the Group is provided by Newry, Mourne and Down District Council area to provide a venue and Fairtrade hospitality for meetings; utilising existing internal structures such as social media and communications (website) with a lead staff member(s) appointed from the council to the Steering Group.

Meetings

The Steering Group will meet at least twice a year.
An annual general meeting will be held once every year, and is open to all members of the Steering Group. Minutes will be taken as a record.

Officers

The Group will elect an honorary Chair, Vice-Chair, Secretary and Treasurer (or combined post) on an annual basis or a similar structure. The Group may also elect other posts if and when those posts are deemed necessary.

Dissolution

In the event of the dissolution of the Steering Group, any assets remaining after all debts and liabilities have been discharged shall not be distributed among the members but shall be handed to the Fairtrade Foundation, 3rd Floor Ibex House, 42-47 Minories, London EC3N 1DY to be administered in a manner that is exclusively charitable at law.

To achieve Fairtrade City status, the following five criteria are required:

1. A resolution has to be passed by the local council supporting Fairtrade, and agreeing to serve Fairtrade products (for example, in meetings, offices and canteens).
2. At least two Fairtrade product ranges or four products have to be readily available in the area's retail outlets (shops, supermarkets, newsagents, cafés and petrol stations).
3. Local workplaces and community organisations (places of worship, schools, universities, colleges and other community organisations) had to support Fairtrade and use Fairtrade products whenever possible. Populations over 100,000 also needed to secure a flagship employer.
4. Media coverage had to be secured, and events had to be organised to raise awareness and understanding of Fairtrade across the community.
5. A local Fairtrade Steering Committee had to be established, comprising members from all sections of the community, including government, to ensure continued commitment.

NEWRY, MOURNE AND DOWN TRAVELLER FORUM

Terms of Reference

Scope:
The mission statement of the Forum is:
'To promote an inclusive and civil society in the Newry and Mourne District Council area by championing Traveller rights and addressing current provisions for the Traveller community within the District'.

The Forum embraces the overall ethos of partnership working by collaborating with key stakeholders and ensuring they have a direct, sustainable link with Elected Members and the policy development and decision-making structures of the Council and the local area. The Forum also provides a safe, shared space for Elected Members to learn about Traveller culture, traditions and lifestyle, and as such, seeks to promote mutual understanding and tackle prejudice on both sides.

Membership:
- Chairperson of Newry, Mourne and Down District Council
- 6 Councillors representing the areas of Newry, South Down and South Armagh,
- Members of the local Traveller Community,
- One representative from the Confederation of Community Groups,
- One representative from the Education Authority,
- One representative from the Health and Social Services Trust.

Chairperson:
The Chairperson of the Council will chair the meetings. In the absence of the Chairperson, the meeting will select a Chair from those present.

Meetings:
The Forum meets on a quarterly basis. It does not operate to any quorum and meetings proceed regardless of numbers in attendance.

Officers:
Head of Strategic Programmes Unit, Programmes Co-ordinator and Corporate Policy & Equality Officer.

Press:
Not open to the press.

Public:
Not open to the public.

Peace
Northern Ireland – Ireland

Comhairle Ceantair
an Iúir, Mhúrn
agus an Dúin
Newry, Mourne
and Down
District Council

NEWRY, MOURNE AND DOWN DISTRICT COUNCIL

And

NI HOUSING EXECUTIVE

POLICE SERVICE OF NORTHERN IRELAND

EDUCATION AUTHORITY (SOUTHERN REGION)

SOUTHERN HEALTH & SOCIAL CARE TRUST

POLICING & COMMUNITY SAFETY PARTNERSHIP

VOLUNTARY & COMMUNITY SECTOR

PARTNERSHIP AGREEMENT

For the IMPLEMENTATION of the Newry, Mourne and Down PEACE IV Plan.

Whereas:

Within the framework of the PEACE IV Co-operation Programme for Northern Ireland and the Border Region of Ireland financed through the European Regional Development Fund (ERDF) of the European Union and managed by the Special EU Programmes Body (SEUPB), hereafter referred to the PEACE IV Programme.

Between the following partners:
LEAD PARTNER

1. **NEWRY, MOURNE AND DOWN DISTRICT COUNCIL**
   Represented by Councillors:

   T Andrews
   G Bain
   P Brown
   C Casey
   S Doran
   K McKevitt
   M Ruane
   D Taylor
   W Walker

PARTNERSHIP MEMBERS

2. **NI Housing Executive**
   Owen Mc Donnell
3. **Police Service of Northern Ireland**
   Paul Reid
4. **Education Authority (Southern Region)**
   Aideen McCormick
5. **Southern Health & Social Care Trust**
   Gerard Rocks
6. **Policing and Community Safety Partnership**
   Siobhan Fearon
7. **Voluntary & Community Sector**
   Martin McMullan
   Seamus Camplisson
   Gordon McDade
   Aimee Boyd
   Briege Jennings
   Paul Yam
   Helen Honeyman
   Declan Murphy
   Gavin Booth

Please note that the use of the term "Partnership" does not signify, and is not intended to establish, that a legal partnership between the parties exists.

Article 1: Subject of the Partnership Agreement

The subject of this Partnership Agreement is the Newry, Mourne and Down Local Action Plan funded by the European Regional Development Fund under the PEACE IV Programme for Northern Ireland and the Border Region of Ireland, "the Newry, Mourne and Down PEACE IV Plan".

Article 2: Duration of the Partnership Agreement

This partnership agreement covers the period 1st December 2016 to 30th June 2020.

Article 3: Role of the Lead Partner

3.1 Newry, Mourne and Down District Council (the Lead Partner) will retain legal responsibility for the management of the PEACE IV funds allocated, including financial monitoring and audit requirements; the Council will also be responsible for any officers who may be employed under this Programme. The Lead Partner shall fulfil all obligations arising from the Letter of Offer and the approved application. In particular the Lead Partner shall fulfil the following obligations.

3.2 The Lead Partner is responsible for the overall co-ordination, management and implementation of the project. The Lead Partner shall be the beneficiary of the ERDF grant and shall manage the funds in accordance with the details of this Partnership Agreement. The Lead Partner assumes sole responsibility for the entire project vis-à-vis the Managing Authority.

3.3 The Lead Partner shall appoint a Project Co-ordinator who has operational responsibility for the implementation of the overall project;

3.4 The Lead Partner will ensure timely commencement of the project and implementation of the entire project within the time schedule in compliance with all obligations to the Managing Authority. The Lead Partner shall notify the Managing Authority of any factors that may adversely affect implementation of the project activities and/or financial plan;

3.5 Reception of payments from the Managing Authority and the management of the EU funds, in particular their timely onward transfer to those organisations commissioned to deliver elements of the PEACE IV Plan; review of the appropriate spending of the EU funds by those organisations; and consolidation of the project-related individual accounting records of those organisations and preparation of all required documents and records for the final audit (with assistance of those organisations);

3.6 Preparation of a work plan setting out the tasks to be undertaken as part of the project and the role of those organisations in their implementation, and a project budget;

3.7 Preparation and submission of periodic progress reports, interim reports, final reports, follow-up budget documentation, financial declarations, requests for payment, financial reports and application for budget or contract clause alterations;

3.8 Any other tasks agreed with those organisations commissioned to deliver elements of the PEACE IV Plan.

Article 4: Role of the Partnership

The Partnership shall have responsibility for endorsing the PEACE IV Plan, for the overall management of Newry, Mourne and Down's element of the PEACE IV Programme, for establishing the criteria to be used in determining applications for funding and for approving funding applications.

Article 5: Roles of Partnership Members

5.1 All Partnership members will participate equally in its operation and will be expected to contribute positively towards the aims of the PEACE IV Programme.

5.2 The members of the Partnership will receive full training in their new roles, responsibilities, relationships, conflicts of interest and standards of behaviour.

5.3 All members of the Partnership will act as representatives for the various sectors from which they have been nominated or selected and will be expected to report regularly to their constituents, to ensure good ongoing feedback, consultation, and accountability.

Article 6: Organisational Structure of the Partnership

The Partnership is established as a Working Group of the Council's Active and Healthy Communities Committee. As such, all recommendations of the Partnership will be subject to the agreement of that Committee and to ratification by the full Council.

6.1 Quorum

The quorum for a meeting of the Partnership shall be 6, including at least 2 elected Members of the Council.

6.2 Chairperson

The roles of Chairperson and Vice Chairperson shall be alternated between the elected members and Social Partners. In the event that the Chairperson and Vice Chairperson cannot attend a meeting, they shall be permitted to appoint a proxy to chair the meeting in their absence.

6.3 Meetings

The Partnership shall meet monthly, with the exception of July when no meeting shall be held. The Partnership shall establish the date and time of its

meetings. Council staff will provide secretarial, administrative and other support services.

Article 7: General Rules for the Regulation of Business by the Partnership

7.1 In any instance of dispute as to the rules governing the order and conduct of business at a Partnership meeting, the Standing Orders of Newry, Mourne and Down District Council shall be used as the appropriate reference document including the policy on conflict of interests

7.2 Voting

The Partnership shall strive to agree all matters before it by reaching a consensus. In the absence of such consensus, any question shall be decided by a majority of the Members present and voting by show of hands. The Chairperson presiding at that meeting may vote and shall, in addition, have a casting vote in the case of equality of votes.

Article 8: NEWRY, MOURNE AND DOWN PEACE IV Plan

The plan is included as an annexe to this agreement.

Article 9: Cooperation with third parties

9.1 In case of cooperation with third parties, including subcontractors, delegation of part of the activities or of outsourcing, all organisations commissioned to deliver elements of the PEACE IV Plan shall remain solely responsible to the Lead Partner concerning compliance with its obligations as set out in this Partnership Agreement including its annexes and through the latter to SEUPB implementing the Programme.

9.2 The Lead Partner shall be informed by the organisations commissioned to deliver elements of the PEACE IV Plan about the subject and party of any contract concluded with a third party.

9.3 No organisation commissioned to deliver elements of the PEACE IV Plan shall have the right to transfer its rights and obligations under this Partnership Agreement without the prior consent of the Lead Partner and the responsible programme implementing bodies.

9.4 Cooperation with third parties including subcontractors shall be undertaken in accordance with the procedures set out in EU public procurement directives.

Article 10: Project Budget & Eligible Expenditure

The Lead Partner is responsible for preparing a project budget setting out an estimate of eligible expenditure and funding arising from implementation of the Newry, Mourne and Down PEACE IV Plan

Article 11: Monitoring, Evaluation & Reporting

11.1 The Lead Partner has overall responsibility for monitoring the actions undertaken by the organisations commissioned to deliver elements of the PEACE IV Plan on an ongoing basis.

11.2 The Lead Partner is responsible for submitting interim reports to the Managing Authority throughout the lifetime of the project and by the official end date of the project in order for final payment to be received. These reports should provide details of the activities undertaken as part of the project, the progress/outcomes achieved against targets, expenditure incurred, an explanation for any variances against the work plan's targets for physical outputs and budget, and proposed corrective actions, and any other information deemed relevant.

Article 12: Communications, Publicity & Dissemination of outcomes

Partners shall play an active role in any actions organized to disseminate the results of the project in line with the agreed publicity and communications strategy (attached as an annex to this agreement.) and the Partnership Communication Policy.

Article 13: Confidentiality

Although the nature of the implementation of the PEACE IV Plan is public, it has been agreed that part of the information exchanged in the context of its implementation between the Shared City Partnership itself or with SEUPB or Programme Steering Committee, can be confidential. Only documents and other elements explicitly provided with the statement "confidential" shall be regarded as such.

IN WITNESS WHEREOF the parties hereto have executed this Partnership Agreement in the manner hereinafter appearing the day and year first herein written.

PRESENT when the Corporate Seal of)
NEWRY, MOURNE AND DOWN DISTRICT)
COUNCIL was affixed hereto:)
)
)
)
)
_____)
CHAIRPERSON)
)
)
)
)
_____)
CHIEF EXECUTIVE)

Name	Signature	Date

ANNEXE 1 – Newry, Mourne and Down PEACE IV Plan
ANNEXE 2 - Communications Plan

SANDSA
Sports Association Newry, Down and South Armagh

Terms of Reference

1. Our Purpose

The Sports Association Newry, Down and South Armagh (SANDSA) Executive will endeavour to secure equal opportunity and seek fair representation from each of the seven district electoral areas within the environs of Newry, Mourne and Down District Council (N,M&DDC): The Mournes; Newry; Slieve Gullion; Crotlieve; Downpatrick; Rowallane & Slieve Croob by requesting them to nominate a candidate who will represent all member sports/activities from their district on the SANDSA Executive with the intent to develop the capacity of their communities by managing programmes, events, facilities and funding opportunities.

2. Mission Statement

To lead and serve sports development and physical activity within the environs of N,M&DDC through a structured environment by promoting community ownership and engaging our communities to work collaboratively to attain their common objectives which lead to healthy lifestyles.

3. Term

This Terms of Reference is effective from Wednesday 21 June 2017 and will be ongoing until terminated by agreement between the sports forums and the executive committee members of the SANDSA.

4. Membership

Sports Club Members

Any amateur sports club, including disability amateur sports clubs and youth group organisations (who cater for physical activity & sport) active within the area of benefit, which subscribes to the Objects of the Charity shall be eligible to join the Charity as a Sports Club or Youth Organisation Member. Each Sports Club/Youth Organisation Member is entitled to one vote at a general meeting of the Sports Forum.

Sports Club Members who engage in the same sport may come together to choose one representative from that sport to sit on their local Sports Forum, except for GAA and Soccer who may appoint two representatives but not from the same sports club. Sports Club Members will be represented on the board of directors by the representatives from the Sports Forums:

Sports Forums

There shall be seven Sports Forums in each of the following district electoral areas in the area of benefit: The Mournes; Newry; Slieve Gullion; Crotlieve; Downpatrick; Rowallane & Slieve Croob, comprising of representatives from each sport as decided by the sports club members of different sports. Only Sports Club/Youth Organisation Members of this Charity shall be eligible to join a Sports Forum. The Chair or a representative of each of the sports forum will be nominated for election to the board of directors (SANDSA Executive).

5. Conditions of Membership (Roles & Responsibilities)

Members of each sports forum (seven) will commit to:

- Attending Meetings: SANDSA encourage all clubs to appoint a 'sports forum liaison officer' to attend their annual sport association (forum) AGM and further two committee meetings over the annual period. Attendance at the AGM (September), will commence from 2019 and is a condition of membership.
- Electing a sports forum chair(s), vice chair(s) and secretaries at the AGM to represent their district sports forum(s).
- Electing a sports forum chair(s) to represent their district sports forum on the SANDSA Executive.
- Club members of each sports forum are expected to be represented at their AGM (September), and GM's (January & May). All Sport Forum(s) reserve the right to call additional meetings, if and when required.
- Pay their sports forum/SANDSA membership fees on or before their sports association AGM, (September).
- In order to qualify for all sports forum/SANDSA membership benefits you must attend the sports association (forum) meetings and pay your annual membership.
- The Membership Fee rate will be agreed by the sport forums (AGM - September) and ratified by the SANDSA Executive Committee (October).
- Promoting membership and registration with your sports forum/SANDSA to enable Newry, Mourne & Down District Council (N,M&DDC) establish a central database for the dissemination of sports development information.
- Seeking and securing independent accreditation for their Club through their Governing Body **or** Sport Northern Ireland (Clubmark N.I.)
- Making application and procuring funding for sport and physical activity, by that, promoting increased levels of health and wellbeing within the environs of N,M&DDC.
- Creating a strong sporting community base to improve empowerment and develop capacity within your community, in so doing, make links with N,M&DDC and other agencies in order to develop sports partnerships/networks.
- Notifying members of the committee/forum, as soon as practical, of any matter arises which may be deemed to affect the development of the sports forum.
- Taking responsibility for responding to your sports forum chairman/person within an agreed timeline to forum business: Generic training, high performance in sport, nomination(s) for awards, and any additional forum business decided and agreed by the sports association (sports forums).
- The SANDSA Executive will meet three times per year: (October (AGM), February, & June).

6. Meetings

- All meetings will be chaired by the chairperson or vice chairperson of your sports forum.
- Decisions will be made by consensus (i.e. members are satisfied with the decision even though it may not be their first choice). If a consensus is not possible, issues may be put to a vote and the chair will have a casting vote.
- The notes of all meetings will be recorded by your sports association (sports forum secretary). In order for N,M&DDC to disseminate same, this information needs to be with Council no later than ten days after the meeting.
- Sport Association (forum) meetings will be held at a location agreed by the forum(s) and N, M&DDC. Additional meetings may be held from time to time at the sports forums discretion.
- If required, subgroups may be established to address specific areas of the committee's work.

7. Amendment, Modification or Variation

This Terms of Reference may be amended, varied or modified in writing after consultation with, and agreement between the Sports Association (Forums) and the SANDSA Executive.

May 2019

Report to:	**Strategic Policy & Resources Committee**
Subject:	*Draft Terms of Reference for the proposed Newry, Mourne and Down Health Forum*
Date:	17 December 2015
Reporting Officer:	Heather McKee, Assistant Director Community Planning
Contact Officer:	Heather McKee, Assistant Director Community Planning

Decisions Required

Approval of Draft Terms of Reference for the Health Forum

Approval of first Task and Finish Forum to advocate for continued A&E provision and Stroke Services at Daisy Hill Hospital.

1.0	**Purpose & Background**
1.1	Council agreed to establish a task and finish Health Forum to allow members to advocate on health related issues.
2.0	**Key Issues**
	• **An outline Terms of Reference for the Health Forum has been drafted for approval by Council.** • **A supplemental terms of reference would be drawn up when Council agrees each specific Task and Finish issue to be addressed by the Forum.** • **The Daisy Hill Action Group has requested assistance from Council to advocate for continued A&E provision and Stroke Services at Daisy Hill Hospital**
3.0	**Resource Implications**
	Staff time
4.0	**Appendices**
	▪ **Draft Terms of Reference**

Newry, Mourne and Down Health Forum

Terms of Reference

The overarching aim of the Health Forum is to consult, involve, listen and respond to communities on key issues which impact the health of citizens.

Scope:

1. To meet as a task and finish, issue specific, group when key health issues arise which require Councillors to represent community views. For example the proposed closure of Slieve Roe House, Kilkeel. Each specific issue would have supplemental terms of reference to define the remit and actions of the task and finish group.
2. To communicate the community's views to the Health Sector and ensuring this does not conflict with community planning objectives and priorities.
3. To provide an environment for a facilitated conversation between the Community and Statutory sector in relation to a key identified health issues.
4. To assist in the prioritisation of local issues defined within a particular geographical area and convey these views to the relevant DEA Forum supporting the implementation of an agreed multi-agency plan of action towards developing sustainable communities.

STANDING ORDERS

The Chairman of each Health Forum shall ensure that the meetings and business shall be conducted in accordance with the requirements set out in the Forum Standing Orders.

ELECTION OF CHAIR AND VICE-CHAIR

Election of Chair & Vice Chair

The Chair and Vice-Chair of each Health Forum shall be appointed by the Fora from amongst the political Members. The period in office will be for the period of the task and shall not exceed 12 months.

The office of Chairman should be held in turn by each of the political parties and independent members represented on the council immediately after the last local general election.

ABSENCE OF CHAIR AND VICE-CHAIR

If the Chair and Vice-Chair are absent from a meeting, those present shall elect one of the Members of the Forum to act as Chairman.

RULING OF THE CHAIRMAN

The ruling of the Chairman upon all questions of order, and of matters arising in debate, shall be final and shall not be open to discussion.

MEETING AGENDA

The meeting agenda and supporting papers will be distributed to members in advance of the Forum meeting (preferably 7 days in advance). The agenda shall not include AOB; however should an urgent issue present itself the Chair, or in their absence Vice-Chair, may be consulted as to whether this matter should be tabled at the meeting or whether a Special meeting is required.

MEMBERSHIP

Each Health Forum shall be made up of Elected Members from a relevant DEA or adjoining DEAs if the issue impacts across more than one DEA, representatives from the community voluntary & statutory sector organisations (by invitation) and Officers of Council.

MEETINGS

The Health Forum does not have decision making powers, they make recommendations only. Recommendations arising will be tabled at the Strategic Policy and Resource Committee for consideration.

The Chair of the Health Forum shall also be provided with the opportunity to attend meetings of the Community Planning Partnership and/or Thematic Working Groups to raise issues agreed as critical by the Health Forum, to ensure effective co-operation and communication of matters relating to the Community Plan.

REMIT

The remit of each specific task and finish health forum will be defined in supplemental terms of reference to be agreed by Council, with a clear start and end date and shall not exceed 12 months.

ATTENDANCE AT MEETINGS

Attendance at meetings of the Forum will be restricted to Members and relevant partner organisations except as otherwise determined by the Members. Attendance at meetings of the Forum of invited organisations, groups or individuals shall be regulated by the Chairman of the Forum.

FREQUENCY OF MEETINGS

The Forum will meet once per quarter unless otherwise agreed by forum Members to address a specific issue or deadline.

IN PUBLIC

The Health Forum can hold a public meeting which will be publically advertised. The dates, times, venues and format of the meetings are to be agreed by the Forum and should facilitate engagement with the public and reflect local priorities relating to health and contribute to Community Plan activity.

NOTIFICATION OF PUBLIC MEETINGS OR EVENTS

At least fourteen days before the date on which a public meeting or event is due to be held, it shall be publicly advertised. The Members of the Forum shall determine the media to be utilised to publicly advertise the meeting or event and endeavour to publicise it through their respective community networks.

MODE OF ADDRESS

Council staff and Members of the Forum shall address and speak of one another at all times in a respectful and courteous manner.

OFFENSIVE EXPRESSION

A Member shall not impute motives or use offensive expression in reference to any Member of the Forum.

DISORDERLY CONDUCT

The Chair, or a Member acting in the role of Chair, may order the removal from the meeting of any member of the public whose behaviour represents a threat to the orderly conduct of the business to be transacted.

If at a meeting any Member, in the opinion of the Chair, misconducts themselves by persistently disregarding the ruling of the Chair, or by behaving irregularly, improperly or offensively, or by wilfully obstructing business, the Chair or any other Member may move "That the Member named be not further heard", and the motion if seconded shall be put and determined without discussion.

If the Member named continues their misconduct after a motion under the foregoing paragraph has been carried:-

(i) the Chairman or any other Member may move "That the Member named do leave the meeting" (in which case the motion shall be put and determined without seconding or discussion); and

(ii) the Chairman may adjourn the meeting for such period as they in their discretion shall consider expedient.

When the Chairman is of the opinion that the due and orderly dispatch of business is impossible, they, in addition to any other power vested in them, may, without question, adjourn the meeting at their discretion for such period as they shall consider expedient.

DECISION MAKING AND VOTING

The Forum should seek to make decisions by agreement and consensus and therefore no voting will take place or be recorded. The Health Forum does not have decision making powers, they make recommendations only. Recommendations arising will be tabled at the Strategic Policy and Resource Committee for consideration.

OFFICERS

???? Manager/Assistant Director, Committee Clerk

PRESS

Invitations to the press shall only be extended for invitation to public meetings

PUBLIC

Invitations to members of the public shall only be extended for attendance at public meetings

QUORUM

The quorum for meetings of the Forum, shall be one quarter of their membership. Upon the attention of the Chairman being called to the fact that there is not a quorum present, the Chairman shall declare the meeting at an end.