

# **Merton Council Council**

**6 July 2022**

## **Supplementary Agenda 8**

23 Councillor Non-Priority Questions and Replies

1 - 10

This page is intentionally left blank

### **From Cllr Klaar Dresselaers to the Cabinet Member for Local Environment, Green Spaces and Climate**

In response to a follow up query in May after a resident reported a tree needing replacement last December, we were told that this service is currently over-subscribed and it may require several planting seasons to be filled. As the Council declared a climate emergency, could the Cabinet Member for Local Environment, Green Spaces and Climate please provide their plans, setting out timelines and funding available for replacing missing trees as well as the upkeep of existing trees in the Borough?

#### **Reply**

The tree team will always look to replace any trees within the same year as the tree is felled, but need to make residents aware that in line with best arboriculture practices, tree planting season is between October and March each year so in some cases it may be the following calendar year.

Linked to the climate emergency pledge the London Borough of Merton Greenspaces Team have worked on a number of initiatives to increase tree planting and canopy cover in Merton, which will see 3000 new trees planted through the borough. In addition, the team have been successful on two separate bids through the Urban Tree Challenge fund to increase our investment in trees by another £155k.

### **From Cllr Michael Paterson to the Cabinet Member for Local Environment, Green Spaces and Climate**

Over the last 12 years the Labour administration has allowed 16 tennis courts and numerous cricket nets at the eastern end of Morden Park to become so dilapidated that an offer of two tennis nets which I secured from the AELTC had to be rejected as the courts are in such a poor state. What plans does the Cabinet Member have to repair the damage, and will she commit to a time scale for the repairs?

#### **Reply**

Morden Park was previously under the control of the London Playing Fields Associations and the Council inherited the tennis courts as well as a number of sports pavilions and associated sports infrastructure, some 30 years ago all in varying stages of disrepair. The pavilions have been systematically removed or repurposed by Parks team over the last 15 years or so as they were no longer fit for purpose.

In line with a review of the existing tennis court infrastructure across Merton, The Greenspaces and Leisure Services Team have been working with The Lawn Tennis Association (LTA) Infrastructure fund to improve strategic priority hard surface courts across Merton.

### **From Cllr John Brathwaite to the Cabinet Member for Transport**

As a regular user of my bicycle for getting around the borough, I have noticed a lot of places on cycle routes that would be inaccessible to disabled cyclists, tricycle users,

## Councillors Non-Priority Questions

and cargo bikes, often used to transport children to school. One parent rented a cargo bike for this purpose, but due to a barrier on the cycle lane between her and the school, she had to return it as it was felt too unsafe to use the alternative main road route. We should be encouraging more use of these methods of transport, both for health and climate reasons. It could also be viewed as discriminatory against disabled cyclists and wheelchair users. As a result, can I ask the Cabinet Member for Transport why these physical barriers are still here, and what progress you are making to remove them?

### **Reply**

As a borough we do encourage cycling and provide as much provisions as funding and site constraints permit. As the actual location has not been provided, it is not possible to respond or address this specific location; however, there are a number of paths classed as PRWs where legally cyclists are not permitted and traditionally barriers such as staggered guard rails have been erected to safeguard pedestrians and to discourage mopeds as well as cyclists. However, it can be confirmed that officers do assess and take the appropriate action when such matters are raised with officers subject to funding.

### **From Cllr Thomas Barlow to the Cabinet Member for Education and Lifelong Learning**

The repurposing of Lavender Nursery provided a much-needed increase of in borough provision for SEND education. Can the Cabinet Member confirm that the administration will not reverse the repurposing of Lavender Nursery?

### **Reply**

Lavender Nursery moved sites from London Road to Lavenders Steers Mead earlier this year and children are settled in their new provision. The London Road site is now being used for pupils from the Merton Medical Education Service.

### **From Cllr Samantha MacArthur to the Cabinet Member for Transport**

Would the Cabinet Member please detail what the target is for EV charging points to help Merton meet our climate emergency commitments? What evidence base is there for this target? How is the siting of charging points decided and how is this consistent with Merton's newly adopted strategic priorities?

### **Reply**

The Council does not currently have a specific target for number of EV charging points, although we are working on the basis of a report published by the International Council for Clean Transport (ICCT) in 2020 which provided estimates of likely charge point requirements in London. This indicates that Merton could need 628 slow or fast chargers and 48 rapid chargers by 2025. By 2030 Merton would require, 1142 slow to fast chargers and 78 rapid chargers.

Locations are decided on analysis of likely demand, including requests from residents, and an assessment of the suitability of the sites.

**From Cllr Daniel Holden to the Cabinet Member for Housing and Sustainable Development**

The Future Wimbledon SPD was passed by Labour and the Liberal Democrats in November 2020 against the wishes of residents as it will lead to development that is too tall, too bulky and too dense. However, in February 2022 the Planning Applications Committee disregarded the Future Wimbledon SPD by passing the St George's House East application.

What is the point of planning guidance if residents dislike it and the Planning Application Committee ignores it?

**Reply**

This administration cares deeply about the character, appearance functioning of all our town centres. Appropriate development will depend on the site and location, but will never include development that is 'too tall, too bulky and too dense.' Obviously, the Planning Committee represents all councillors, is not whipped and acts in a quasi-judicial capacity.

The National Planning Practice Guidance advises members of a Planning Committee to make decisions as follows:

*"Local authority members are involved in planning matters to represent the interests of the whole community and must maintain an open mind when considering planning applications. Where members take decisions on planning applications, they must do so in accordance with the development plan unless material considerations indicate otherwise. Members must only take into account material planning considerations, which can include public views where they relate to relevant planning matters. Local opposition or support for a proposal is not in itself a ground for refusing or granting planning permission, unless it is founded upon valid material planning reasons".*

Members will always be required to carefully balance competing planning considerations and robust decisions are made in line with the above guidance.

**From Cllr Kirsten Galea to the Cabinet Member for Housing and Sustainable Development**

Many planning authorities have at least one Access Officer who ensures that planning applications, especially those buildings/developments planning to provide a service to the community, per minimum comply with the building regulation Approved Document M and the London Plan. Would the Cabinet Member explain what the Council is doing to ensure that people in Merton are able to access and use buildings and their facilities?

**Reply**

The current Building Control Team Leader has lengthy experience in handling access proposals and has been a representative of an Access Committee. The Building Regulations requirements are applied to all schemes which are processed through the Council's service. The inclusion of a new Access Officer is to be considered as part of

## Councillors Non-Priority Questions

the Corporate review of the Building Control staffing structure and resourcing which has just been commenced.

### **From Cllr Eleanor Cox to the Cabinet Member for Housing and Sustainable Development**

Residents are deeply concerned about the proposals for the redevelopment of Mitcham Gasworks which would see 13 storey high rise development in a residential area characterised by family homes. Will the Cabinet Member commit to preventing out of character high rise development at Mitcham Gasworks and support the development of low-rise family homes on the site?

### **Reply**

The council is not supportive of a 13-storey building on the Mitcham Gasworks site and has made this clear to the applicant, both as part of Merton's new Local Plan and directly as part of pre application dialogue. The applicant has stated that they are due to submit a planning application to the council in summer 2022. Should the council receive a planning application we will carry out community consultation in the usual way and residents will be able to have their say on the proposed scheme.

As the cabinet member, I can only seek to uphold planning policy and cannot direct the work of planning officers in respect of any particular application or interfere in the quasi-judicial approach of the Planning Committee. I have met with the developers and expressed that the view that even 10 storeys was too high as the highest part of intended development and that affordable family housing should not be located in high buildings.

### **From Cllr Jil Hall to the Cabinet Member for Sport and Heritage**

Could the Cabinet Member please confirm the number of complimentary (or reduced rate) tickets (including Royal Box invitations) that the AELTC (or their agents) have given to:

1. The Mayor of Merton and their deputy;
2. Members of the cabinet;
3. Other members of the council; and
4. Employees of the council in each of the last five years (including this year)

In respect of the Wimbledon Championships and any other sporting or entertainment events.

### **Reply**

In respect to the Wimbledon Tennis Championships, the following represents the tickets allocated to the council during The Championships. The tickets offered each year cover the thirteen scheduled days of the Championships as detailed below: -

1. Eight books of complimentary Centre court tickets totaling fifty-two pairs of tickets, (thirty-nine pairs of which were allocated to staff, thirteen pairs were assigned to the Mayor).

## Councillors Non-Priority Questions

2. Eight pairs of chargeable Centre Court tickets (allocated to Councilors at face value, for the 2nd, 4th, 6th, 8th, 10th, 11th, 12<sup>th</sup>, and 13th day of the Championships).
3. Five pairs of chargeable Court No.1 tickets (allocated to Councilors at face value, for the 1st, 3<sup>rd</sup>, 5<sup>th</sup>, 7<sup>th</sup>, and 9<sup>th</sup> day of the Championships).
4. Sixty-five pairs of chargeable Grounds Passes (allocated to staff at face value)

## Questions on the Strategic Theme

### **From Cllr Tony Reiss to the Cabinet Member for Health and Social Care**

The NHS cancer plan states that earlier diagnosis is critical in ensuring patients receive treatment when there is a better chance of achieving a complete cure. For those with suspected breast cancer this means seeing a specialist within 2 weeks. Could the Cabinet Member state how many weeks women in Merton need to wait to be seen by a specialist, and what is being done to speed that up?

### **Reply**

Cancer Screening is an NHS service commissioned by NHS England who work with providers to deliver cancer screening. Merton is part of a South West London Breast Screening service based at St Georges NHS Trust. The Council does not commission or manage this service but does have an local oversight role on cancer screening.

NHS England and RM Partners (RM Partners is a collaborative of providers forming the West London Cancer Alliance hosted by The Royal Marsden - who work with Trusts to deliver the cancer screening pathway e.g. initiatives to improve performance) have provided the following information.

There is currently a restriction on extracting borough level data and therefore they cannot provide Merton data alone. They therefore are only able to provide data on a south west London (ICS) level. The latest month of data available is April 2022.

#### **Compliance against the 14 Day (2WW) Standard**

In summary, the latest compliance data for South West London ICS highlighting patients waiting 14 days or less for their first appointment is 57%. A further 22% were seen between day 15-28.

Whilst 2WW remains a constitutional Cancer Waiting Times standard, it is worth noting that NHS Trusts are also working towards the relatively newly introduced Faster Diagnosis Standard (October 2021) which will replace the 2WW standard in the coming year. This newer standard measures the time a patient waits from GP referral to when they are informed whether they do or don't have cancer.

The performance against this standard in April 2022 was 75.1% against the 75% target for those referred with suspected Breast Cancer. Whilst this is compliant they are still committed to improving this percentage.

To add further context to the current waiting times for appointments and diagnosis, the demand on breast services from October 2021 – April 2022 has been at record levels with referrals being at 10-20% higher than the corresponding month pre-pandemic. This additional demand is a result of

## Councillors Non-Priority Questions

patients not accessing healthcare during COVID waves and the prolonged step down of the national breast screening programme in 2020.

### **What are we doing to speed up waiting times for appointments?**

Between the RM Partners Cancer Alliance and the south west London provider Trusts, there are a number of initiatives being undertaken to reduce waiting times. These include:

- Creating Additional Capacity Through Additional Workforce
- Improving Current Pathways to Maximise Efficiencies
- Working with Primary Care to Manage Referral Volumes

**Further information from SWL Integrated Care Board** - highlights the role of the 'SWL Breast Cancer Task and Finish Group' who support Trusts to implement pathway efficiencies and share best practice.

We will take these issues up with our partners in the NHS and ask them to respond to all the points you have raised.

### **From Cllr John Oliver to the Cabinet Member for Health and Social Care**

I note from the strategic theme report produced for Council, that men above the age of 35 are the largest group of people taking their own lives in Merton. The Suicide Prevention Strategy 2018-2023 sets out a number of approaches towards this group. As this 5 year strategy nears its end can the Cabinet Member tell us what actions have been carried out and how successful they have proven to be?

### **Reply**

A full review of the 2021/22 Action Plan is underway and the proposed 2022/23 Action Plan will be discussed at the multi-agency Suicide Prevention Forum in October 2022. Key activities that have focused on middle aged men include: The commissioning of three programmes (over three successive years) of Mental Health First Aid and Suicide Prevention training, targeted at those working with at risk groups including lower income middle aged men. Training has ranged from 2 day Mental Health First Aid courses, 1 day Mental Health Champion and ½ day suicide awareness training. Those attending training have included Clarion Housing, the Police, WDP (substance misuse provider), staff at Job Centre Plus, all of which work with this target demographic. We also targeted training at healthcare staff including GP surgery staff and community and voluntary sector organisations. Because data that informed the strategy suggested a higher rate of older men died by suicide (although the largest group still remain middle aged men) we also targeted training at older people's organisations including Age UK Merton and Wimbledon Guild. We have also worked with SWL CCG to deliver suicide prevention awareness sessions focusing on middle aged men. This has included sessions with Merton's Community Champions, Council staff Mental Health First Aiders, Library managers and staff working on the Tuned In project, attendees at Merton's Faith and Belief Forum and staff at Merton College. Other activity has focused on raising awareness with the public on the importance of good mental health including a community fair of Mental Health Providers. Other awareness activity includes promotion of Zero Suicide



## Councillors Non-Priority Questions

Alliance training video to Council employees and to community and voluntary sector partners.

We have also raised awareness of risk amongst middle aged men via the Suicide Prevention Forum which recently looked at the risk of suicide amongst middle aged men and the risk factors created by the Covid-19 pandemic. Partners such as Citizens Advice were present and we highlighted the risk factors of money problems, unemployment, and relationship breakdown affecting middle aged men and how Covid-19 may have impacted some of these factors.

Libraries have successfully developed and run the successful 'Tuned In' music project aimed at addressing loneliness and isolation in men (and whilst targeted at middle aged men is open to all). This last year has seen the project open a second evening for music programming (funded through SWL CCG suicide prevention funding), and another Men's Shed has also opened, run by the Togetherness Community in Mitcham.

A thematic review has been completed on all drug and alcohol related deaths, known to Merton's adult substance misuse service. This was presented to and discussed with Merton's Adult Safeguarding Board. Suicide or accidental overdose represented 15% of reported deaths. Work progressing into 2022/23 will utilise the information from the Review to identify risk factors and how we can take a multi agency approach to reduce risk in this vulnerable cohort.

### **From Cllr Victoria Wilson to the Cabinet Member for Health and Social Care**

Would the Cabinet Member please state what measures she is taking to respond to residents' survey feedback that they are concerned by Merton's poor quality and unsafe walking and cycling infrastructure?

### **Reply**

Merton's roads, footways and cycle lanes are maintained in a safe condition through a number of proactive programmes. The council undertakes condition surveys every year of all the adopted pavements and roads in the borough and uses a robust prioritisation model to rank them so that the highest priority pavements and roads are reconstructed each year. This model benchmarks and ranks all roads in the borough in comparison to each other and considers a range of criteria such as Engineers Assessment, Condition Survey results, Road Classification, Safety Inspector Priority, Reactive Maintenance Expenditure, Traffic Volumes, Population Density, Emergency, Bus and Cycle routes, Traffic Generators (schools & hospitals etc), Ward Deprivation and Complaints Received. The information used in this model is reviewed and updated annually at the time that the programmes are developed to ensure that the most current picture of the network is taken into account.

In addition to the proactive road maintenance and reconstruction programme we undertake a system of regular highway safety inspections of all its adopted highways (pavement and road) in order to comply with its statutory duty to maintain highways in accordance with Section 41 of the Highways Act 1980. Safety inspections are designed to identify defects that meets the Council intervention criteria. The risk of danger is identified by a highways officer on site, and if a defect meets the intervention criteria this is categorised in terms of an appropriate priority response. This helps to maintain our pavements and roads in a safe condition.

### **From Cllr Chessie Flack to the Cabinet Member for Health and Social Care**

Could the Cabinet Member please explain why the strategic theme report does not include the widespread concerns raised with Members, by residents from across the borough, about how difficult it is to see their family doctor and what she proposes doing to discover what is going on in Primary Care, particularly regarding appointments with GPs?

### **Reply**

The Strategic Theme Report is focused on the Council's collaborative work to support residents who are most in need, promoting safety and wellbeing, with an emphasis on health inequalities. Rather than being completely comprehensive, the report gives a range of examples of relevant work and its impact.

- We have been working with our health partners who lead on access to primary care and a report on this subject came to the Health and Wellbeing Board on 22<sup>nd</sup> March 2022. The report and slides are available via the HWBB committee webpage and relevant links are:

#### Primary Care Access in Merton Report 22 March 2022

Slide set on Primary Care Access in Merton 22 March 2022 (see slides 32 – 53)

- A report on Primary Care Access also came to the Healthier Communities and Older People Overview and Scrutiny Panel on 2<sup>nd</sup> November 2021.
- Most recently the NHS have published a response to the Fuller Stocktake which sets access to primary care as a priority in Next Steps for Integrating Primary Care: Fuller Stocktake Report by NHS England and NHS Improvement commissioned by Dr Claire Fuller CEO (Designate) Surrey Heartlands ICS. For details are available please see:

<https://www.england.nhs.uk/wp-content/uploads/2022/05/next-steps-for-integrating-primary-care-fuller-stocktake-report.pdf>

- In response to a question from Cllr Gould we also received the below response from Emma Gillgrass, Assistant Head of Primary Care – Resilience, Merton and Wandsworth NHS South West London CCG, on measures taken to improve access to GPs following the COVID-19 pandemic:
  - At the start of the Covid-19 pandemic General Practice followed NHS England guidance and moved to a total triage model. Through this model all patients were initially triaged via telephone/video). In many cases patients could be safely managed remotely but where it was clinically necessary for patients to be seen face to face they would be invited into the practice, or an alternative hub site, to be seen. To ensure the safety of staff and patients, practices were adhering to strict infection prevention and control policies, including cleaning, wearing PPE and social distancing.
  - Practices are continuing to offer a blended approach with a mix of remote and in person consultations throughout their core practice hours (Monday

## Councillors Non-Priority Questions

to Friday 8am-6:30pm) with many practices offering extended hours outside of these hours. Patients can request face to face consultations, however practices may continue to assess patients ahead of these to ensure they have no Covid symptoms/have not tested positive to ensure that care can be provided in a safe environment for both patients and staff. There may be occasions when practices have staff isolating and so working remotely who can therefore only offer remote consultations.

- Additional winter funding was made available from NHS England for the period November 2021 to March 2022 to support practices to increase the number of face to face appointments they were offering, as well as overall numbers of appointments to help manage demand over the winter period.
- We have six access hubs across Merton offering additional appointments, both telephone and face to face, that all practices can book patients into, these hubs have also benefited for the winter access funding to offer additional appointments, which include up to 8pm in the evening and 8am-8pm on weekends and bank holidays.
- Practices are continuing to expand their workforce, utilising the PCN funding for Additional Roles to employ a range of new staff including social prescribers, clinical pharmacists, first contact practitioners, paramedics and mental health workers.
- Practices have been doing additional clinics to try and catch on services such as childhood immunisations and cervical screening which although did continue throughout the pandemic patients were often reluctant to attend healthcare settings.

### Moving forward:

- Digital – We have a digital workstream for primary care. All practices are now working on implementing one of three new Online Consultation suppliers. Change management support is available to practices and PCNs to embed this. There are also various other digital focused pieces of work. Moving to digital can cause inequities as not everyone access to or is able to use technology so there is also work going on to ensure we don't exclude anyone and all patients can still access primary care
- Primary Care access – from 1st October the Primary Care Networks will become responsible for enhanced access. This brings together two current access funding streams – one which is already delivered by PCNs and one which in Merton is currently delivered by the Federation through our 6 access hubs. The requirements are changing slightly from provision 8am-8pm 7 days a week to 8am-8pm Monday to Friday and 9am to 5pm Saturdays, so we are looking at our other primary care access services along with the plans the PCNs are developing to ensure we still have an equitable, accessible model for primary care to support patients, practices and the wider healthcare system.

### **From Cllr Robert Page to the Cabinet Member for Health and Social Care**

Given recent unexpected outbreaks of communicable diseases, such as monkeypox and scarlet fever, could the Cabinet Member please state what the council is doing

## Councillors Non-Priority Questions

to ensure all possible public health prevention and mitigation measures are being taken to protect the health of those living and working across the borough, particularly amongst our children and vulnerable residents?

### **Reply**

Local authorities have had a statutory duty to provide oversight to ensure that health protection arrangements are robust. Merton Public Health have an active Health Protection Oversight Group and protocol that discharges this responsibility and we work with wider partners e.g. the Regulatory Services Partnership and the United Kingdom Health Security Agency (UKHSA) to protect the health of those living and working across Merton.

The partnerships that were built upon during the acute response phase of the COVID-19 pandemic, including those with key settings including schools and care homes, are still in place and will be used to prevent and manage incidents related to health protection in the future and to increase uptake of other health protection functions e.g. immunisations and cold and hot weather planning.