

WAVERLEY BOROUGH COUNCIL

MINUTES OF THE MEETING OF THE EXECUTIVE – 29 SEPTEMBER 2009

SUBMITTED TO THE COUNCIL MEETING – 20 OCTOBER 2009

(To be read in conjunction with the Agenda for the Meeting)

- |                                  |                          |
|----------------------------------|--------------------------|
| * Cllr Richard Gates (Chairman)  | * Cllr Stefan Reynolds   |
| * Cllr Mike Band (Vice-Chairman) | * Cllr John Sandy        |
| * Cllr Mrs Carole King           | * Cllr Roger Steel       |
| * Cllr Robert Knowles            | * Cllr Adam Taylor-Smith |
| * Cllr Ms Denise Le Gal          | * Cllr Keith Webster     |

\* Present

Cllr Ken Reed attended to speak on Agenda Items 6, 7, 13, 16 and 19 (Minute Nos 88, 89, 87, 96 & 98 refer), and Cllr Mrs Celia Savage attended to speak on Agenda Item 13 (Minute No 87 refers). Cllr Peter Isherwood was also in attendance.

82. MINUTES (Agenda Item 2)

The minutes of the meeting of the Executive held on 1 September 2009 were confirmed and signed.

83. APOLOGIES FOR ABSENCE (Agenda Item 3)

No apologies for absence had been received.

84. DISCLOSURE OF INTERESTS (Agenda Item 4)

Personal interests were declared as follows:

Agenda Item 13 –

Cllr Knowles as a member of the League of Friends of Haslemere Hospital;

Cllr Ms Le Gal as a member of the League of Friends of Farnham Hospital and a Member of Farnham Town Council;

Cllr Sandy as President of the League of Friends of Milford Hospital; and

Cllr Mrs Savage as a member of Cranleigh Health Watch.

Agenda Item 8 –

Cllr Steel as a member of Farnham Town Council.

85. QUESTIONS BY MEMBERS OF THE PUBLIC (Agenda Item 5)

In accordance with Procedure Rule 10, the following questions had been submitted:

From Mr David Wylde of Farnham

“Is it the intention of Waverley Borough Council that the Avoidance Strategy, relating to SANGS mitigation for the Thames Basin Heath Special Protection Area, should merely be an extension of the current mini-plan, or is the

Strategy intended to be a policy to be adopted within the new Core Strategy Local Development Framework?”

The Leader of the Council and Executive Portfolio Holder for Planning responded as follows:

“An Interim Avoidance Strategy provides the necessary mitigation measures to allow planning permissions where appropriate to be granted for acceptable housing within the 5km zone, without adverse effect on the SPA. The Core Strategy will include policies to address SPAs in the longer term and will require an Appropriate Assessment to show that the approach set out in the Core Strategy does not adversely affect Waverley’s SPAs.”

From Mrs Celia Sandars of Farnham

“Unfortunately, Waverley's responses to the Formal Questions about the SPA Avoidance Strategy put to the ELOS Committee meeting on 8 September, by myself and by my husband, and paragraph 16.1 of the Interim Avoidance Strategy ('IAS') before us, appear to demonstrate that the solid evidence required to satisfy 'Waddenzee' (as per Statutory Obligation 06/2005 para 21) does not exist, and that Waverley does not have any evidence that the proposed Strategy will not have the opposite effect to that intended. So, I have to ask whether your legal advisers are categorically stating that the use of the IAS, as posited, would be lawful?”

The Leader of the Council and Executive Portfolio Holder for Planning responded as follows:

“The short answer is ‘yes’. The Council’s legal advisers will continue to provide guidance on the legal implications of the Avoidance Strategy. It should be recognised that the draft Strategy has been prepared within the context of the statutory South East Plan recently published by the government and the Thames Basin Heaths Delivery Framework recently adopted by the Thames Basin Heath Joint Strategic Partnership Board (JSPB). The JSPB includes the acknowledged experts on the Special Protection Area (Natural England and the Royal Society for the Protection of Birds).

From Mr Jerry Hyman of Farnham

“The IAS consultation sought alternatives to using Farnham Park as SANG, with the result that the owner of the 'land to the east of the Park' offered such a solution in early summer, and I understand the plans are with Natural England. Can you please confirm that the Planning Department and Councillors are aware that this alternative solution is available, which does not risk prejudicing the Park and has the added advantage of being a genuine new SANG (and which we are told Natural England agreed 'ticks all the boxes' as an ideal solution in the short and medium term) and that it is receiving full and proper consideration by Members?”

In Mr Hyman’s absence, the Leader of the Council and Executive Portfolio Holder for Planning responded as follows:

“The Council is aware of a number of possible alternatives to Farnham Park. This includes land to the east of the Park and analysis of this site’s potential is set out in page 72 of the Executive papers. Discussions are taking place with the landowner and his representatives to consider the potential for this site as SANG.”

### **PART I - RECOMMENDATIONS TO THE COUNCIL**

86. ROWLAND HOUSE DEMOLITION (Agenda Item 12; Appendix G)
- 86.1 The Executive received a report that recommended that the Rowland House and Ivy Hall residential building be demolished by Thames Valley Housing Association (TVHA) at the earliest opportunity and that they be given an undertaking so that the Council pays the costs if the development does not happen.
- 86.2 Rowland House was an elderly persons’ sheltered housing scheme built in the 1960s, which was now redundant, and the building empty awaiting redevelopment.
- 86.3 A project had been undertaken over the past 18 months to plan and design the new development of social rented units that would replace the existing buildings. Members will be aware of the process that had been undertaken, which had chosen Thames Valley Housing Association to design, build, and own the new accommodation.
- 86.4 In February of this year the Executive agreed the principle of layout, future ownership and management by TVHA
- 86.5 TVHA was currently in discussions with WBC on the procedure for submitting a planning application and subsequent legal transfer of the site. It was expected that the application would be made in November 2009. If successful, transfer would follow during the spring of 2010 with a potential start on the site in the summer of 2010.
- 86.6 In the meantime the existing building complex of Rowland House was empty and increasingly becoming a security risk. Although measures to minimise damage had been put in place, there had been sporadic break-ins and internal vandalism.
- 86.7 In a report to the Executive in April 2008, at the commencement of the current project, it was agreed that the existing decommissioned building be retained until its replacement was decided. It was now appropriate to revisit that recommendation given the progress made in appointing an RSL partner and designing and planning of the scheme.
- 86.8 Whilst there had been an initial six-month exemption from Council tax, the regulations are such that despite removal of fixtures and fittings, it is due for all the flats (see [Exempt] Annexe 1). Advice had been taken on how this could be avoided and it was evident that only full-scale demolitions could avoid this expenditure.

- 86.9 It had been intended that TVHA would demolish the building immediately subsequent to transfer and as part of the new build process. However, it would be advantageous if the demolition were carried out as soon as possible.
- 86.10 TVHA had indicated their willingness to carry out the demolition at their cost prior to the transfer of the site, and preparations had been carried out to enable that to happen during the autumn season. However the condition is that WBC agree to underwrite the costs of demolition (see Exempt Appendix 1) if for any reason the transfer does not go through.

The risks associated with that eventuality are set out below:

- 1) Planning permission is refused:  
The planning department had been fully involved with the discussion with TVHA on the options for the site and pre application meetings are held regularly as part of the preparation for this scheme.
  - 2) TVHA were to withdraw from the agreement for financial reasons:  
TVHA had shown considerable commitment to the achievement of this scheme, and had stated in their submissions that if grant from the Homes and Community Agency was withdrawn from this scheme then TVHA would still look to fund the development.
- 86.11 TVHA and the Council were currently in the process of preparing documentation to exchange contracts for the transfer of the site, which sets out clearly the commitment on both sides to enter into the agreement. However, when the demolition is complete any costs associated with the work were likely to be recouped by the enhanced value of the site, if the Council needed to recommence negotiation with another developing organisation. Additionally an empty site would reduce the lead in time for any future redevelopment.
- 86.12 Rowland House was now empty and becoming a liability in terms of on site security and Council tax expenditure.
- 86.13 TVHA have agreed to demolish prior to transfer and at no cost to the Council providing that the Council can give an undertaking to TVHA to underwrite the costs of demolition if the development does not occur.

Ongoing expenditure to Rowland House

	£ per month
Council Tax charge on Rowland House	5,830
Security visits	513
Estimated maintenance costs	<u>400</u>
	6,743

- 86.14 If agreed it was expected that demolition would commence before 1 December therefore the potential saving to the HRA would be between approximately £27,000 and £40,000 depending upon the actual date of transfer.

86.15 The Executive accordingly

**RECOMMENDS that:**

- 35. TVHA be allowed to demolish Rowland House, providing the necessary hoarding, security, and full protection and making good to the division with Rowley's day centre;**
  - 36. Waverley underwrites the costs of demolition in the event of a failed transfer of the Rowland House site to TVHA, noting that if required it would be funded from the Affordable Housing Capital Programme until the capital receipt for the site is received; and**
  - 37. the Council enters into an appropriate agreement with TVHA to permit the demolition of Rowland House as soon as reasonably practicable.**
87. NHS SURREY GUILDFORD & WAVERLEY PROGRAMME BUSINESS CASE – CONSULTATION RESPONSE BY WAVERLEY BOROUGH COUNCIL (Agenda Item 13; Appendix H)
- 87.1 The Executive received a report on NHS Surrey's proposals under the Guildford & Waverley Programme for the future provision of care in south-west Surrey for stroke rehabilitation, orthopaedic rehabilitation and post-acute care for complex elderly who may have added care needs such as dementia.
  - 87.2 Between 2002 and 2006 the former Guildford & Waverley Primary Care Trust embarked on a major modernisation programme of locally based healthcare services. The consultation document, *Modernising Your Local Healthcare* (December 2005), set out five options for change, all of which considered the future of services provided at Milford Specialist Rehabilitation Hospital, Cranleigh Community Hospital, Haslemere Hospital and Farnham Hospital & Centre for Health. The options were consulted on from December 2005 – February 2006, in what was a highly contentious and political process.
  - 87.3 The Public Consultation Outcome document provided information about the outcome of the public consultation, which was a recommendation to pursue *Option 1*. This proposed, amongst other things, that the Milford Specialist Rehabilitation Hospital should close and services be relocated to Farnham Hospital, and that the 14 beds and Day Hospital at Cranleigh Community Hospital should close.
  - 87.4 In October 2006, Surrey Primary Care Trust (now known as NHS Surrey) was established, and it was agreed that the decision to implement *Option 1* would be 'put on ice' until such time as the wider review on the *Fit for the Future* programme was concluded. However, notwithstanding that decision, because of financial and service pressures, the PCT decided to close the beds and Day Hospital at Cranleigh Community Hospital as an urgent, temporary measure.
  - 87.5 The *Fit for the Future* programme focussed on improvements in clinical services, reflecting clinical evidence gathered nationally and locally, and set

standards for acute service provision in seven speciality areas. Following the adoption of the *Fit for the Future* business case by the Surrey PCT Board in September 2007, the Guildford & Waverley Programme was set up to take forward the actions set out by the former Guildford & Waverley PCT and the Surrey & Sussex Strategic Health Authority with regard to the hospitals in Milford, Farnham, Haslemere and Cranleigh, i.e. the so-called *Option 1*. It is important to note that besides the recommendations to close Milford Hospital and the beds at Cranleigh, there were also recommendations to develop diagnostic facilities at Cranleigh, Farnham, Haslemere and Godalming; day hospitals at Farnham and Haslemere; and local treatment facilities for the population of Godalming.

- 87.6 The Programme Mandate for the current consultation was approved in March 2008 and set out how *Option 1* was to be tested. Separate workstreams were established, covering Cranleigh, Godalming (including Milford), Farnham, Haslemere, and specialist rehabilitation services. An additional working group was set up to review transport and parking issues. This consultation is mainly about one of the workstreams.
- 87.7 In July 2008, the NHS Surrey Board accepted the recommendation from an Independent Panel that *Option 1* did not meet the requirements of the White Paper *Our health, our care, our say*, or other recent health policies, including the national stroke strategy. A brief was agreed setting out the revised scope and objectives for the Guildford & Waverley Programme. The work of the Programme in relation to specialist rehabilitation services has now concluded, and the recommendations of the Programme were agreed by the NHS Surrey Board on 4 August 2009.

### **Current Proposals**

- 87.8 The recommendations of the Guildford & Waverley Programme Strategic Outline Business Case reflected the implications of adopting a new clinical model of care in south-west Surrey for stroke rehabilitation, orthopaedic rehabilitation, and post-acute care for complex elderly who may have additional complications such as dementia.
- 87.8 The new clinical model of care had been developed with stakeholders and clinicians and was based on national policy, best practice and local factors. It had been considered in co-design events, which had been attended by clinicians, local organisations, and Waverley members and officers. The proposed model aimed to deliver improved patient outcomes and was based on a menu of care options for consultant-led multi-disciplinary assessment and treatment either in an acute hospital, a specialist rehabilitation unit, or in the patient's home.
- 87.9 The proposed model of care had implications for the locations from which various services were provided, which was of particular concern to Waverley. The conclusions and recommendations are set out in Annexe 1. Full details of the new model of care, the explanation of the implications, and the options appraisals and cost-benefit analysis are available in the Guildford & Waverley Programme Strategic Outline Business Case document. This document is available online at the NHS Surrey website at:

[www.surreyhealth.nhs.uk/contactus/HaveYourSay/Pages/Improvingrehabilitation-services-in-Guildford-and-Waverley.aspx](http://www.surreyhealth.nhs.uk/contactus/HaveYourSay/Pages/Improvingrehabilitation-services-in-Guildford-and-Waverley.aspx)

87.10 The key recommendations were:

- 1) That Farnham Hospital site be used as the Specialist Rehabilitation Unit predominantly facing the Frimley Park Hospital NHS Foundation Trust (no change).
- 2) That the Milford Hospital site be refurbished and used as the Specialist Rehabilitation Unit predominantly facing the Royal Surrey County Hospital NHS Trust (essentially, no change in patient pathways).
- 3) That there should be a consultation on the implications for Cranleigh Hospital, these being:
  - the commissioning of 6-8 NHS funded beds in the Cranleigh area (*probably from private nursing care homes*);
  - the establishment of a state-of-the-art consultant-led day assessment and rehabilitation service in the redeveloped Cranleigh Hospital;
  - the permanent closure of the 14 GP-led beds at Cranleigh Village Hospital.

### **Milford Hospital**

87.11 The alternatives to refurbishing Milford Hospital, at an estimated cost of £585,000-£1,451,000, were to establish a new-build specialist rehabilitation hospital either on the RSCH site, or at Cranleigh. Both of the new build options were estimated at £6m, plus the cost of decommissioning the beds at Milford. *(NB This alternative option reviewed by the PCT was not one that involved the Cranleigh Village Hospital Trust).*

87.12 Milford Hospital currently provided the Milford Assessment & Rehabilitation Centre (MARC) plus two 20-bed wards. Whilst these buildings were apparently in reasonably good condition, there is a further 20-bed ward (Oak Ward) that had been closed for some years. Healthcare Special Interest Group (SIG) members saw for themselves when they visited Milford Hospital last December that it had been allowed to fall into a state of disrepair.

87.13. Whilst it was not intended at this time to re-commission Oak Ward, the brief for the tender for refurbishment of Milford Hospital would include Oak Ward. That was part of the provision to establish a range of beds to enable the system to flex to meet increased or decreased demand (Conclusion 6).

87.14 The proposals appeared to be good news for Milford Hospital, and provided certainty over its future. The Milford Hospital Campaign Group had formally responded to the proposals to welcome and endorse the investment in rehabilitation services at Milford.

### **Cranleigh Hospital**

87.15 The Cranleigh Hospital issue was very sensitive. There was no disagreement locally with the view that the current GP and Health Centre in Cranleigh was no longer fit for purpose, and NHS Surrey had made a commitment to replace

this. This project had been delayed pending the outcome of the Guildford & Waverley Programme.

- 87.16 The hospital buildings in which outpatient, therapy and rehabilitation services were currently provided were also in need of replacement and expansion in order to accommodate the proposed modern consultant-led outreach day assessment and rehabilitation service. Those buildings were attached to the Listed Cranleigh Village Hospital building, and any development would be subject to normal planning processes.
- 87.17 NHS Surrey has had an independent audit carried out on the admissions to the 14 GP-led beds at Cranleigh Hospital in 2005/06, immediately prior to the temporary closure. Of the 184 admissions, 142 were from the Cranleigh area. If those admissions came forward under the new model, 78% would enter the new model of consultant-led care for complex elderly and rehabilitation services; 7% would be dealt with by the Falls service; and 15% would enter the End of Life (palliative) care pathway.
- 87.18 The position of NHS Surrey, therefore, was that the clinical evidence supported the permanent closure of the 14 GP-led beds at Cranleigh Hospital. It also supported the commissioning of 6-8 NHS-funded beds in the Cranleigh area, to provide respite care, end of life care, and step-up type services to prevent the need for acute hospital admission. Those beds will be nurse-led. It is proposed that in the short-term, at least, those beds will be commissioned in local nursing homes. It was noted that there were no hospices that are local to Cranleigh to provide palliative care.
- 87.19 As the uses of those beds would vary, the NHS Surrey position was that there appeared to be no particular advantage in locating those beds together. Therefore NHS Surrey proposed to commission those beds in local nursing homes.
- 87.20 Members would be aware that there was another community-led, option for delivery of hospital and health centre services in Cranleigh. The principal partner in that proposal was the Cranleigh Village Hospital Trust, which over the years had raised considerable funds from the local community to progress the objective of developing a new village hospital for Cranleigh. A site had been acquired in Knowle Lane, through a land exchange between the Parish Council and a local benefactor. Outline planning permission existed for a new Village Hospital and health centre on that site, although the detailed planning permission had now lapsed.
- 87.21 NHS Surrey proposed that the business cases for the redevelopment of the hospital/health centre site, and for the development of a new build on the Knowle Lane site, would be worked up in parallel and independently evaluated according to criteria prescribed by the Department of Health. The intention was that a recommendation would go to the January 2010 NHS Surrey Board meeting. For either scenario, NHS Surrey only had a commitment of £4.7m capital funding, which must be fully committed by April 2011.



87.22 It was important to note that NHS Surrey only had a legal duty to consult on the change of services in Cranleigh, not the location from which they would be provided. It was anticipated that planning applications for both sites would be submitted to Waverley by NHS Surrey by the end of October.

### **Publicity on the options**

87.23 Waverley had helped promote the consultation exercise through information on its website and was encouraging its residents to have their say on the future of stroke and orthopaedic rehabilitation and post-acute care services in the Borough. NHS Surrey had provided a roadshow in Farnham, Haslemere, Milford, Godalming and Cranleigh, and was also committed to holding a public meeting in Cranleigh before the end of the consultation period.

### **Draft response by Waverley Borough Council**

87.24 The draft response, attached at Annexe 2, was based on the discussions of the Healthcare SIG, following a presentation by Helena Reeve, Communication Director, and Jill King, Programme Director on 18 August. It had also been informed by discussion at the meeting of the Towns & Parishes on 14 September. The Healthcare SIG met again on 16 September to consider the draft consultation response further and to take account of the points made at the Towns & Parishes meeting.

87.25 In principle, the SIG felt that it was important for Waverley to take a borough-wide perspective on the proposals, as there were local interest groups who would respond on the specific issues relating to Milford and Cranleigh.

87.26 In short, the response welcomed the proposals for Milford, and offered guarded support for the proposals for Cranleigh. However, it was clear from discussions that there was considerable frustration with the narrow focus of the proposals; with the piecemeal approach to service development by NHS Surrey, which meant that proposals of end-of-life care outside Cranleigh were not addressed; with the way in which wider issues, particularly for local services in Godalming, and non-emergency patient and carer transport, seemed to have been forgotten; and with the difficulty for lay people to understand the 'big picture' of what services were available, where, when, and for whom.

87.27 Whilst these issues were beyond the scope of the current consultation, we felt that it was important that they be raised, both in Waverly's response and also directly to the NHS Surrey Chief Executive by letter from the Chief Executive and Portfolio Holder.

87.28 The consultation period on the proposals for Cranleigh closes on 10 November. In view of the importance of the proposals to our residents and the political sensitivity of the Cranleigh proposals in particular, it is recommended that Waverley's response be considered and agreed by Council at its meeting on 20 October.

Executive 66  
29.09.09

87.29 The Executive considered the draft response and were concerned that there were some areas that lacked clarity and required strengthening due to emerging information. Members were invited to submit these to the Portfolio Holder.

87.30 The Executive accordingly

**RECOMMENDS that:**

38. the Chief Executive, in conjunction with the Portfolio Holder be authorised to amend the draft consultation response to be submitted to the Council in the light of recently emerging information, and any views of members be communicated to the Portfolio Holder; and
39. the issues beyond the scope of the current consultation also be raised by the Chief Executive, in consultation with the Portfolio Holder, direct with the NHS Surrey Chief Executive.

Background Papers

There are no background papers (as defined by Section 100D(5) of the Local Government Act 1972) relating to this report.

**PARTS II AND III - MATTERS OF REPORT**

Background Papers

The background papers relating to the following items in Parts II and III are as specified in the agenda for the meeting of the Executive.

**Part II – Matters Reported in Detail for the Information of the Council**

There were no matter falling within this category

**Part III – Brief Summaries of Other Matters Dealt With**

88. EXECUTIVE FORWARD PROGRAMME (Agenda Item 6; Appendix A)

RESOLVED that the forward programme of key decisions for Waverley Borough Council be adopted subject to deferring the Youth Strategy to February 2010.

89. REVENUE BUDGET 2009/10 (Agenda Item 7; Appendix B)

RESOLVED that

1. the proposed savings identified in Annexe 1 & 2 of the agenda papers be approved;

2. the additional budget reports to supplement normal budget monitoring arrangements be agreed; and
3. the proposals to balance the forecast overspend on the Housing Revenue Account be approved.

90. REVIEW OF THE THAMES BASIN HEATHS SPECIAL PROTECTION AREA AVOIDANCE STRATEGY (Agenda Item 8; Appendix C)

- 90.1 The Executive received the report and accepted that the Council would be unlikely to be able to achieve the overall housing allocations target for Waverley if provision was not made for some appropriate and controlled level of development in Farnham.
- 90.2 The Council, therefore, had to consider an Avoidance Strategy to meet the overall housing allocation targets and the need to provide for suitable appropriate and controlled development within the 5km area of the SPA provided it identified SANG.
- 90.3 If the Council was minded to continue to use Farnham Park, the Executive accepted that expert advice was that the current allocation could be doubled, and that no additional significant capital work to the Park would be necessary.
- 90.4 The Executive asked officers to investigate the following sites as alternative SANG's (not in priority order)
- Alice Holt
  - Land to the East of Farnham Park
  - Farnham Quarry

and, if none of the above sites was found to be suitable, to look further at the other two possible sites.

- 90.5 The Executive agreed that existing tariffs be reviewed and the additional proposed tariff to fund National England be investigated.
- 90.6 The Executive

RESOLVED that

1. the detailed comments on Annexes 1, 2 and 3 and the observations of the Executive be referred to the November meeting of the Environment and Leisure Overview and Scrutiny Committee; and
2. the Executive give further consideration of this matter at their meeting on 1 December 2009.

91. OMBUDSMAN INVESTIGATIONS INTO COMPLAINTS MADE ABOUT WAVERLEY'S SERVICES IN 2008/09 (Agenda Item 9; Appendix D)

RESOLVED that the comments made by the Corporate Overview and Scrutiny Committee be endorsed.

92. COMPLAINTS HANDLING IN WAVERLEY IN 2008/09 (Agenda Item 10; Appendix E)

RESOLVED that the recommendations of the Corporate Overview and Scrutiny Committee be endorsed.

93. WAVERLEY COMMUNITY PARTNERSHIP 2010-11 FUNDING ROUND (Agenda Item 11; Appendix F)

RESOLVED that:

1. for budget planning purposes, the total amount of the revenue grants pot and the contribution to the Waverley Voluntary Grants Partnership in 2010/11 be frozen at the 2009/10 level;
2. the existing partner organisations be advised:-
  - a. of the pressures facing Waverley's budget in the coming years;
  - b. that it may be difficult to maintain support at previous levels; and
  - c. that link officers will work with partner organisations in seeking additional funding support from elsewhere.
3. the 2010/11 bidding round should be opened and that applications from new organisations be considered, and
4. the future of the scheme be included in the Community Overview and Scrutiny's special review of how the Council supports the voluntary sector.

94. COMMUNITY VOLUNTEERING POLICY (Agenda Item 14; Appendix I)

RESOLVED that the Waverley Employee Volunteering Scheme (WEVS) be approved and adopted.

95. CORPORATE IDENTITY – THE NEXT STEPS (Agenda Item 15; Appendix J)

RESOLVED that the report be agreed.

96. HOUSING REVENUE ACCOUNT SUBSIDY REVIEW – UPDATE (Agenda Item 16; Appendix K)

RESOLVED that

1. the officers and tenants involved in the excellent progress already made on this issue be commended; and
2. the proposed next steps set out in paragraphs 18 and 19 of the report, taking into account the observations of the Community Overview and Scrutiny Committee, and in particular that Waverley continues to make the case nationally that the government should take on the burden of the historic national housing debt be commended.

97. THE BLACKWATER VALLEY HOUSING MARKET (Agenda Item 17;  
Appendix L)

RESOLVED that the principle of the proposed nomination sharing arrangement for larger sites in the Blackwater Valley, as detailed in the report, be agreed subject to the correction of the number of nominations.

98. OCKFORD RIDGE – INVESTING IN THE FUTURE (Agenda Item 19;  
Appendix M)

RESOLVED that:

1. action be taken to improve the housing at Ockford Ridge, Godalming and, as a first step;
2. the Council dispose of two dwelling houses owned by the Council at 167 and 168 Ockford Ridge, Godalming on the open market on terms to be negotiated by the Council's Deputy Chief Executive and the Estates and Valuation Manager;
3. the capital receipt from the sale of these properties be applied to Decent Homes work to the housing stock at Ockford Ridge, Godalming;
4. the Council agree to undertake a programme of double-glazing Council-owned homes at Ockford Ridge, Godalming and makes budget provision within the HRA Capital Programme (2009/10 and 2010/11) of £718,000 for this purpose;
5. the Deputy Chief Executive and Head of Housing be authorised to extend or seek further tenders if necessary for the current double-glazing contract subject to a re-negotiation of terms in consultation with the Portfolio-holders for Housing and Finance; and
6. the Housing Portfolio-holder, with the support of officers, works up a medium-term strategy for addressing the wider needs of the Ockford Ridge community and the investment needs of the property and continues to communicate and liaise with residents, the local community and local councillors.

99. PERFORMANCE MANAGEMENT REPORT, QUARTER 1 (APRIL – JUNE) 2009/10 (Agenda Item 20; Appendix N)

The Executive having considered the performance figures for quarter 1 as set out in the Annexe 1, and the comments of the Overview and Scrutiny Committees at Annexe 3

RESOLVED that

- i) the recommendation of the Community Overview and Scrutiny Committee recommending that the five new indicators aids and

adaptations performance indicators set out at Annexe 2 to the agenda papers be included in future performance reports; and

- ii) the outcome of the review of targets by Officers at Annexe 4 to the agenda papers, and the amended targets proposed for 2009/10 onwards be approved.

100. IT SECURITY (Agenda Item 23; [Exempt] Appendix O)

*[Note pursuant to Section 100B(5) of the Local Government Act 1972: This report contains exempt information by virtue of which the public is likely to be excluded during the item to which the report relates, as specified in Paragraph 3 of Part I of Schedule 12A to the Local Government Act 1972, viz:-*

*Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime]*

RESOLVED that the security measures and approach set out in the report be endorsed and the Acceptable Use of ICT Equipment and Systems Policy for Staff be released from exempt.

101. ACTION TAKEN SINCE LAST MEETING (Agenda Item 18)

There had been no action taken since the last meeting.

The meeting commenced at 6.45 p.m. and concluded at 8.41 p.m.

Chairman