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28 June 2007

To: All Members of the Overview & Scrutiny Committee  
c.c. All Other Persons Receiving Overview & Scrutiny Committee Agenda

Dear Councillor,

Overview and Scrutiny Committee - Monday, 2nd July, 2007

I attach a copy of the following items for the above-mentioned meeting which were not available at the time of collation of the agenda:

**6. THE CABINET'S PRIORITIES FOR 2007/08: HIGH PERFORMING VALUE FOR MONEY PUBLIC SERVICES (PAGES 1 - 14)**

(Report of Councillor George Meehan, Leader of the Council) To report to the first ordinary meeting of the Overview & Scrutiny committee in the new municipal year the cabinet's priorities for the new municipal year and beyond.

**7. WI-FI IN SCHOOLS (PAGES 15 - 42)**

(Report of the Deputy Director of the Children & Young People's Service (Business Support & Development)) To provide to the committee additional information provided by Members of the public in relation to the Wi-Fi in Schools item. These consist of:

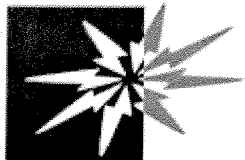
- Associated Press article on criticism of the World Health Organisation provided by Dr Grahame Blackwell (pages 15-16)
- Open letter to Dr Mike Clark (Health Protection Agency spokesman) from Dr Grahame Blackwell (pages 17-18)
- Paper by Sarah Purdy MA on Wi-Fi in Schools (pages 19-40)
- Advice to Schools on use of Wi-Fi from Michael Bevington of Stowe School (pages 41-42)

**11. OVERVIEW AND SCRUTINY - WORK PROGRAMME 2007/08 (PAGES 43 - 58)**

(Report of the Chair of Overview & Scrutiny) To determine what issues the Committee would like reported to it during the Municipal Year, and to agree "task and finish" scrutiny review panels, and to agree scrutiny of the budget. This report has already been provided to Members of the committee in hard copy.

Yours sincerely

Jeremy Williams  
Member Services



Haringey Council

**Overview and Scrutiny**
**On July 2<sup>nd</sup> 2007**

REPORT TITLE: **THE CABINET'S PRIORITIES FOR 2007/8: HIGH PERFORMING VALUE FOR MONEY PUBLIC SERVICES**

REPORT OF: **COUNCILLOR GEORGE MEEHAN, LEADER OF THE COUNCIL**

WARDS(S) AFFECTED: **ALL**

REPORT FOR: **INFORMATION**

**1. PURPOSE**

1.1 To report to the first ordinary meeting of the Overview and Scrutiny Committee in the new municipal year the Cabinet's priorities for the forthcoming municipal year, and beyond.

**2. RECOMMENDATIONS**

2.1 To note the report and comment on the priorities for 2007/8 as determined by the Cabinet.

2.2 To confirm Overview and Scrutiny Committee's active participation in research and policy development through its formal Reviews and consideration of the Forward Plan.

Report Authorised by:

**COUNCILLOR GEORGE MEEHAN, LEADER OF THE COUNCIL**

**3. EXECUTIVE SUMMARY**

This Administration realises the many benefits successful scrutiny can bring.

Scrutiny is a key role for front line Councillors and provides opportunities for an authority to engage with and consult the public, experts and service providers. Overview and Scrutiny contributes to the development of better policies and performance.

While the Cabinet makes all of the Council's decisions within the budget and policy framework set by full Council, it is the Overview and Scrutiny Committee that provide the checks and balances in our governance structure.

Scrutiny's role is to take steps to ensure that the Cabinet Councillors who make decisions about the Council's services are held accountable for their actions, and that decision making processes are robust and transparent.

Scrutiny involves Councillors working with local people, community organisations, and agencies working in partnership with the council, customers and competitors to improve policies and provide effective and responsive services.

This Cabinet values the Overview and Scrutiny function and I am happy for this opportunity to outline the Cabinet's priorities for 2007/8 and beyond.

## Introduction by the Leader of the Council

The 2007/8 Cabinet is committed to bringing new energy to implementing our manifesto for Haringey and pursuing priorities.

The restructure of our portfolios has allowed us to improve our focus on those priorities and to make clearer our vision for Haringey. The renaming of the Executive as the Cabinet emphasises the collective and collegiate approach we have.

Together, the Cabinet is a dynamic team bringing both fresh ideas and proven competence to our Council. They are:

- |  |                        |
|--|------------------------|
| • Adult Social Care and Well-being         | Cllr Bob Harris        |
| • Children and Young People                | Cllr Liz Santry        |
| • Community Cohesions and Involvement      | Cllr Lorna Reith       |
| • Enterprise and Regeneration              | Cllr Kaushika Amin     |
| • Environment and Conservation             | Cllr Brian Haley       |
| • Housing Services                         | Cllr Isidoros Diakides |
| • Leisure, Culture, and Life-long Learning | Cllr Dhiren Basu       |
| • Resources                                | Cllr Charles Adje      |
| • Safer Communities and Enforcement        | Cllr Nilgun Canver     |

Collectively, we believe that the future is bright for Haringey Council. Under this administration, Haringey has the capacity to be a leading and influential council – a trailblazer for modernisation and performance in local government, changing lives and transforming communities.

There has been improved performance in services across the council and our CPA audit ratings are at their highest ever. Educational achievements are still rising with more pupils achieving five or more A-C grades in 2006 than ever before. Seven of our parks have won the Green Flag status - the best in London. We have grasped the green agenda. We have set higher design standards for all new developments, with energy conservation and sustainability a must. And there are now more recycling opportunities for everyone in the borough.

There is no room for complacency and we must continue to strive for even better outcomes for local people. To do this we have now reviewed effective systems to monitor service delivery, and identify where action needs to be taken.

Stable finances are a pre-requisite for service delivery. As leader I set out a 3-year rolling budget strategy which laid the foundations for the council's financial stability over the last few years. Some difficult decisions had to be made in setting the budget for this year and all the signs are it is not going to get easier. Nevertheless, I believe we are in a sound position to deal with these challenges.

It is our aim to achieve excellent services across the board for all of our residents. Excellent services are important not just in themselves, but because unless people see democratic local government delivering on their priorities they will lose the trust in representative politics that is crucial to community cohesion. Our role is to bring Community Leadership to all public services. We also intend to increase people's involvement in the shaping of their excellent services.

We have seen many positive changes in the way the council is run. We are now working with local people, the police and other agencies to make real improvements in line with residents' priorities.

The Cabinet recognises that residents, businesses and other stakeholders are important in continuing our success in Haringey and taking the borough forward.

The Cabinet has recognised that continued improvement revolves around the following elements:

- **The Council Plan – Guiding the way we work as an authority**
- **Communication with our Residents**
- **Strong Leadership from Councillors – Our response to the Local Government White Paper (strong and prosperous communities)**
- **Focus on performance**
- **Delivering the Community Strategy and LAA within the HSP and its partners**
- **This administration's priorities by portfolio**

### **DELIVERING THE ADMINISTRATION'S PRIORITIES AND THE COUNCIL'S RESPONSIBILITIES WITHIN THE COUNCIL PLAN AND THE COMMUNITY STRATEGY**

The Council Plan sets out how the Council will further improve services to meet the needs of Haringey's residents.

It outlines how the Council will contribute to Haringey's Sustainable Community Strategy and includes how the priorities of the elected administration will be achieved.

This administration's vision is for Haringey to be a Council we can all be proud of. The priorities and the key areas for delivery are:

#### 1. Making Haringey one of London's greenest boroughs.

To deliver this we shall:

- increase recycling
- introduce initiatives to make Haringey sustainable
- address transport issues in the borough

## 2. Creating a Better Haringey: cleaner, greener and safer.

We shall:

- improve the natural environment
- continue to improve the cleanliness of the borough
- improve road condition and road safety
- contribute to the reduction of crime and fear of crime

## 3. Encouraging lifetime well-being at home, work, play and learning

We shall:

- ensure that all children and young people in Haringey have a bright future and enjoy the best chances in life
- improve housing
- increase opportunities for leisure
- maintain and extend our library services

## 4. Promoting independent living while supporting adults and children when needed.

We shall:

- support vulnerable people to live independently with a better quality of life
- support all children
- prevent homelessness
- continue to regenerate the borough and provide prosperity for all.

## 5. Delivering excellent, customer focused, cost effective services.

We shall:

- consult and engage with our residents
- improve residents' perceptions
- support councillors
- maintain community cohesion and celebrate the diversity of the borough
- embed the improved arrangements for securing value for money
- strengthen our Corporate Programme

The audience for this plan is primarily council staff, managers and Elected Members. It may also be of use to our partners and other stakeholders. The plan is for three years and will be updated annually.

The Council Plan reflects the political priorities of the elected administration.

### **COMMUNICATION WITH OUR RESIDENTS**

The Council's communication strategy uses the whole range of media to communicate with residents. We know this is increasingly successful from annual resident's surveys which show consistent rises in key measures such as how well we listen and inform.

It is this administration's policy to always be as open, transparent, accurate and as timely as possible with the flow of information, and also to make it easy for residents to communicate back to us.

Below is a brief summary of our main channels.

### Haringey People

The magazine is delivered to every household in the borough ten times a year and is shown by independent research to be far and away residents' most preferred source of information about the council's work and policies. We are increasing the number of pages per issue to enable even more useful information about the council's work and policies to be disseminated. Residents are given opportunities to comment on the magazine through periodic reader surveys, the annual residents' survey and three-times a year tracking.

### Website

Website usage continues to rise. Following its revamp last year, which was based on users' needs and requirements, annual usage has increased by one million to the current rate of 17 million page impressions a year. Whereas not everyone in the borough is e-enabled, an increasing number are, and it is important that we keep the site up-to-date, user friendly, useful and, where appropriate, inter-active. Besides e-business transactions, we notice an increasing number of people contacting us with queries via the website. Work on the young people's site is also well under way and we expect this to help to build a more positive communicating culture among the emerging generation of new voters and taxpayers.

### A-Z of services

This year's A-Z uses an all-new design that is very easy to use. The publication is compact and we suggest to residents that they keep it near their telephone for easy reference. It includes the important section on how the council is spending their money and its borough-wide distribution with *Haringey People* ensured blanket cover.

### News

Although most people prefer *Haringey People* to local papers, the latter remain a powerful presence in the borough and they are important conduits for information between the council and its residents and other stakeholders. That is why CCU continues to dominate the news agenda with a steady flow of pro-active material that we know from close contacts with journalists, from research and media evaluation, will be given coverage. Take up of our releases is well into 90+ per cent and the balance of positive/neutral cover much in our favour. Feedback from editors is that the council now has a reputation for being open and communicative with the media.

### Consultations

Much has been done in the past 18 months to move Haringey Council's record in consultations from the third division to the Premier level. Intensive in-house training led by professional consultations staff is resulting in far more staff in the council knowing how to consult properly. Best practice such as giving adequate notice, facilitating easy ways of voicing views and access to results is spreading through the council, backed by an online toolkit and a new in-house traded service providing low cost but highly professional advice and guidance. There is an electronic, inter-active consultations calendar and a published charter that sets out clearly and transparently how we will work. With a few exceptions, the standard is rising quickly and shows every sign of continuing to do so. Consultation is one of the most important two-way channels of communication and we are determined that our residents will have the best.

### Publications

Publications on a wide range of council services and other information about the public's health, safety and welfare are distributed through many public contact points. Publications contain information about contacting the relevant service area for more information or suggestions and complaints. This is another important way of ensuring two-way communication and we intend to strengthen it by encouraging high street retail outlets to help to distribute such material.

### **STRONG LEADERSHIP FROM COUNCILLORS – OUR RESPONSE TO THE LOCAL GOVERNMENT WHITE PAPER, STRONG AND PROSPEROUS COMMUNITIES**

For our communities to thrive and for our residents to prosper, they need responsive, accountable, democratic governance. People need to understand how decisions are made, see who is making them, and feel they can influence decisions which affect them. Local councillors are the bedrock of local democracy. Our elected Members have a critical role to play in delivering quality, relevant services and leading and strengthening our communities.

Haringey's services continue to improve, but must not be allowed to stagnate through complacency. Maintaining service improvement against a background of rising resident expectations and a stricter economic climate means hard choices will need to be made. Only elected councillors have the legitimate authority to make these difficult decisions. Strong leadership of our services is a must. Strong, but accountable leadership; a Cabinet which is subject to clear checks and balances, which is held accountable to our communities for the decisions it takes on their behalf. And responsive leadership, which consults with our communities, and involves them in decisions, making our services more relevant to our residents.

Our communities also need strong leadership from individual councillors. The Frontline role is one of the keys to effective engagement with the local community. As community leaders, Councillors can get close to our residents, understand their needs, research opinions, test options, and communicate this information back to the council. Communicating decisions of the council back to residents and explaining them and their relevance to communities is an equally important role for all Councillors in their community leadership role.

Our communities are hugely diverse and we must work to maintain and improve the cohesiveness which they enjoy. For our communities to be effective they must be empowered to solve local problems. Community groups, businesses, and residents need to work together constructively. Residents need to feel they have a stake in their areas. Frontline Councillors are critical to the success of our communities. Councillors understanding of their wards and their constituents, means they are uniquely placed to champion their areas: providing direction, helping to develop local solutions, fostering effective relationships with and between organisations, and advocating on behalf of areas to influence all public services.

In October 2006 the Government issued a local government White Paper, *Strong and Prosperous Communities*.

This has been followed by the introduction of an associated *Local Government and Public Involvement in Health Bill*, (due to pass into law by the end of the year) and two reviews (The Quirk Review in Community Ownership of Assets and the Roberts Commission on the Role of Local Councillors).

Many of the arguments of the White paper, moreover, found support in the independent Lyons Review into the Future of Local Government, published in March

These papers and reports have important implications for Haringey councillors and the council more broadly. The bill before Parliament, will, when passed, impose new requirements on councillors and officers. (It will, for instance, require the council to change its leadership model).

But in addition to new legal requirements, the White paper and other reports urge the council to pursue some actions, without obliging them to do so, and provide the council with the opportunity to pursue others.



Haringey has already begun to respond to these developments.

- On 5<sup>th</sup> June at a cross Party Leader's conference, members were given a presentation and held a discussion on the whitepaper.
- An all party White Paper working party is in the process of being set up to further explore options before the council.
- The Deputy Leader has asked officers to develop a fresh Community Cohesion Strategy
- A model for how the 'Community Call for Action' might work in a Haringey context has been developed and circulated at the Leader's Conference. Scrutiny members will be discussing this further and exploring ways of piloting Haringey's approach in preparation for the introduction of the Community Call for Action.
- Officers are working with the HSP Performance Management Group to prepare transition from the current to new performance framework, though this will not come into force April 08.

## Key Dates

- July 2007 Supporting guidance on Scrutiny and CCfA issued
- Nov 2007 Publication of the Roberts Commission
- April 2008 New overview and scrutiny powers introduced
- New bylaws power introduced
- April 2008 New duty of LAs to involve local people established
- Spring 2010 New leadership model in place for London councils

As I reported to members of overview and scrutiny earlier this year, plans are being drawn up for a borough-wide community cohesion forum. I look forward to Members' active participation in this forum.

## **FOCUS ON PERFORMANCE WITHIN THE COUNCIL AND THE ACHIEVING EXCELLENCE AGENDA 2007/08**

In 2006 the Council was rated as a good 3 star Council and improving well under the Comprehensive Performance Assessment. Within that most service areas were scored as 3 out of 4 with the exception of Adult Social Services.

Our 2006/07 performance demonstrates that the Borough is continuing to move in the right direction.

In the next three years we need to consolidate performance in improving areas as well as identify areas where we can drive up performance so we can continue to meet the expectations and needs of residents.

Our focus in this municipal year will be to:

- regain our 2 star rating in Social Care
- continue the good work in improving educational attainment including that of looked after children
- maintain our customer focus and improve customer service centres and call centre performance
- ensure that we deliver value for money services
- continue improving street scene services
- ensure we deliver on our priority to become one of the greenest boroughs

- work on providing decent and affordable housing
- ensure that we deliver on our commitments in the Local Area Agreement
- ensure that our residents recognise the improvements we are making

### **DELIVERING THE COMMUNITY STRATEGY AND LAA WITH THE HSP AND ITS PARTNERS**

The Council and the HSP have now approved our new Sustainable Community Strategy (SCS), covering the period from 2007 to 2016. This is built firmly on what residents and businesses told us in an extensive consultation across the borough. This new strategy sets out the 10 year vision for Haringey, and is the overarching plan driving the Local Area Agreement (LAA) and all other strategies.

'A sustainable way forward' has six large themes to drive achievement over the next decade. They incorporate the aspirations of local people and partners and are set out below:

1. **People at the heart of change** – ensuring that everyone benefits from changes in the borough and that we can all enjoy high-quality facilities and an attractive environment.
2. **An environmentally sustainable future** –tackling climate change locally, achieving this through better management of environmental resources, increased recycling, more sustainable transport and energy use.
3. **Economic vitality and prosperity shared by all** – focusing on getting people into work, improving skills and qualifications among young people and adults, and increasing skills linking people to jobs and greater prosperity.
4. **Safer for all** – our aim is to reduce crime and the fear of crime; we will also provide better support to victims and the most vulnerable, and make our homes and public spaces safer.
5. **Healthier people with a better quality of life** – tackling health inequalities and create decent homes; to ensure babies and children have the best possible start in life and that our residents live longer.
6. **People and customer focused** – we will deliver quality services that address needs and provide value for money; we want effective community leadership; and we want to increase civic participation and volunteering.

With the government's new focus on 'place-shaping' and an enhanced role for the Council as lead body for the strategic partnership the Community Strategy has an important role because it is jointly developed and owned by the partnership. So, although community strategies are not new there is a renewed emphasis on their role in setting the high-level vision for local areas which drive holistic place-shaping.

The Community Strategy and the six outcomes provide the long-term vision; it is the LAA which is the tool for delivering and achieving these. Essentially a 3 year contract between the HSP and the Government, the LAA is at the heart of the Government's drive to rationalise the way Whitehall works with local areas, and to encourage agencies and partners to pool resources and ideas to achieve the agreed outcomes and targets. Nationally there are 4 blocks – *Children and Young People; Safer and Stronger Communities; Healthier Communities and Older People; Economic Development and Enterprise* – and the targets and outcomes are split across these.

In practice this means that a range of targets, funding streams and monitoring regimes from across different services are brought together within this large contract. The LAA is to be 'the only place where central government will agree targets with local authorities and partners', so the Government is moving away from specific funding for specific targets, requiring instead delivery against a smaller number of targets but now supported by all resources in combination.

Some targets are mandatory, reflecting national priorities, and some are negotiated locally, addressing local priorities driven by the SCS. Government is also giving the Council and partners, through the HSP, more freedom in how we choose to address and achieve the targets – what matters now is delivery and outcomes.

### Haringey's Local Area Agreement

Our LAA went live April 1, 2007, running for three years but with an annual review. It comprises 21 mandatory targets, 12 optional targets and alongside these, 13 'stretch targets' agreed in negotiation with partners and Government. The stretch targets are spread over the LAA's four blocks, and across the HSP's six theme boards. They include 'increasing recycling participation in super output areas', 'improving living conditions for vulnerable people' and 'reduction of litter and detritus in super output areas'.

Responsibility for delivery lies with the HSP's six theme boards with the Council acting as an Accountable Body managing all the funding streams on behalf of the partnership. The Council must therefore ensure there is a clear audit trail for the spend and delivery. Our total LAA grant from Government – comprising several existing funding streams which have been brought together – is over £15m. Additionally a further £16m is 'aligned' funding, where partners have voluntarily lined their funding up together to achieve outcomes.

To incentivise joined up working, the LAA includes both a pump-priming grant and a reward grant. The pump-priming funding of almost £1m is currently awaited from GOL, and is allocated to kickstart work on the 13 stretch targets. Should these be achieved over the 3 years the HSP will receive its £9m prize.

The LAA is a real challenge for partnership working and is essentially a test of how agencies can pool their ideas and commitment to achieve the best outcomes for their communities. In essence it is the key framework that will underpin the new forthcoming Comprehensive Area Assessment regime (effective from April 2009) and mentioned in the White Paper which is likely to pool additional resources.

### **THIS ADMINISTRATION'S PRIORITIES**

In 2006 the people of Haringey returned a Labour administration with a clear and comprehensive manifesto to deliver for the borough. The manifesto emphasized achievement and involvement for our young people, low and stable taxation, cleaner streets, safer communities, and an environmentally sustainable future.

As I set out below, we are making strong progress against our commitments and we are well on track to deliver the bulk of them by 2009. Furthermore, we are putting in place the strategies and the policy framework to make and deliver an equally ambitious set of promises after 2010.

### **Housing**

Throughout the upcoming year the council plans to continue to build on the progress it has made integrating all aspects of housing. One key factor in this progress has been improved partnerships at all levels. At the local level HSP, IHB, and RSLs have improved operational relations. By harnessing the power of the North London sub-region Haringey can combine forces with other boroughs. Finally, Haringey council will continue to make effective use of London-wide bodies such as London Councils and the LDA.

Beginning in 2008 and continuing through 2011 Haringey will implement the Integrated Housing Strategy. This is a multi-agency organisation, owned by HSP. Other strategies include; the Long-term Elderly Housing Plan, estates regeneration, improving new housing developments, and creating sustainable homes and neighbourhoods.

## **Environment and Conservation**

Haringey is committed to the well-being of the environment, both globally and locally. We have several policy targets planned for the upcoming year. The first is developing the Greenest Borough Strategy to ensure that climate change initiatives are incorporated into the council's and partners' corporate priorities. In accordance with this is the revitalization of the Better Haringey programme, which aims to ensure that Haringey is one of London's greenest boroughs.

Highway repair and maintenance is an important priority. To facilitate higher quality service we will establish a commissioning framework for the replacement of existing frontline operational contracts, including the Haringey Accord contract. In addition, we will ensure the production of the LIP and secure investment in the Borough's highways infrastructure.

To help us achieve these goals we are maintaining and building partnerships with statutory undertakers and council contractors. These relationships will serve to secure a step change in the performance of these organisations under the provisions of the New Roads and Street Work Act, as well as the Traffic and Management Act. We intend to be leaders in sustainable development through work with the Better Places Partnership. And finally, we will continue working with partners in the RSL sector to secure better environmental management of estates.

Haringey will remain a leader on environmental issues. As demonstrated by the council's performance as one of the best performing authorities under the CPA Environment Block in relation to BVIPs, we are committed to improving the quality of the environment. This year we will implement new controlled parking arrangements for the Borough. This includes the emission-based differential parking charges and a review of the CPZ programme. And as always, it is our goal to expand communication and marketing strategies to raise the profile of the council's performance in relation to the environment.

## **Community Cohesion and Involvement**

First and foremost the council's goal is to promote community cohesion and equality through publications, seminars, and events. Upcoming events include bicentenary celebrating the end of the transatlantic slave trade, Holocaust Memorial Day, Peace Week, and Black History Month. Renewed focus on the Disability Discrimination Act with respect to access and employment is one of the many ways Haringey promotes equality. Other initiatives involve implementing the council's Equalities Policy and Scheme, achieving the Equalities Standard for Local Government Levels 3 and 4, and ensuring Equality Impact Assessments are completed.

In the next year we will begin the WOW! Awards program across the council. Our membership of the Institute of Customer Service and the Customer Charter will improve the council's effectiveness in addressing customer needs. Goals of these services are to improve customer feedback, establish a regular forum with voluntary agencies and advocacy groups, and manage the Heartlands development.

We highly value Haringey's volunteer and community groups. Partnering with HAVCO and HSP will allow Haringey to put in place a new Community Empowerment structure that encourages and supports community representation. Neighbourhoods are another valuable sector of the community and as such we are developing the role of Area Assembly chairs. In particular, the Assembly will begin pilot arrangements for resolving issues at the local level in preparation for responding to the Community Call for Action procedure.

## **Enterprise and Regeneration**

This portfolio is targeted at developing a new regeneration strategy for Haringey. One aspect of the new strategy will be to support corporate services management through the use of external funding. We will always direct the spending of GAF 2 funds and develop new projects for GAF 3 at approximately £20 million. By the end of 2007 phase one of the development proposal for Haringey Heartlands Master plan will have made more progress.

On 17<sup>th</sup> May, Planning Application Sub-Committee resolved to grant planning permission (subject to S106 and referral to GLA /GOL) for a revised outline scheme in respect of the former GLS site (known as Hale Village), that was submitted on 5<sup>th</sup> April. The outline scheme includes 1210 residential units, a primary school, crèche, hotel, offices and retail. Also includes a 30 metre- wide linear park which crosses the site, and provides an east-west route for pedestrians.

To make sure these strategies are carried through we have partnered with many agencies and organisations. For example, we are working with Mountview Theatre to determine the viability of bringing a new theatre to Haringey. We are also working with the City Growth programmes to ensure it delivers support to identified cluster businesses. Finally, we are also teaming up with Enfield on the Central Leaside Area Action Plan.

Other priorities include re-commissioning the LDA programme in the Upper Lee to meet Haringey's needs, maximising opportunities for the Olympics, and working on the successful delivery of the SSCF and ESF funded programmes. We also aim to ensure the continued operation and growth of the Haringey Guarantee beyond the initial two funding pilots. Finally, if our bid is accepted we will deliver a major conservation programme in Myddleton Road.

## **Children and Young People**

Providing the utmost quality of education, health care, and support services to the children and young population of Haringey is a responsible we take very seriously.

We will continue to focus on the upward trend in school standards. We will ensure all Child Protection processes and procedures work efficiently, so our children remain safe. Capital projects like BSF, children's centres and primary school are making progress in a timely and cost effective way. This year we intend to increase the number of children and young people engaging in positive activities after school by restructuring the Youth Services and extending school programmes.

Broadwater Farm Children's Centre has won a London Regional RIBA (Royal Institute of British Architects) award and has been put forward for a national RIBA award, the results of which will be announced on Friday.

The Triangle Centre was officially opened on 7<sup>th</sup> May by the Parliamentary under Secretary for Children, Young People and Families, Parmjit Dhanda MP.

We have developed ten cross-cutting areas to supplement the *Changing Lives* agenda. First, reducing teenage conceptions and supporting teenage parents will provide better life chances for their children. Improving the lives and life chances for children and young people in the care of the LA, with disabilities, with mental health needs, and through affordable healthcare for parents is a top priority. Haringey is working toward reducing the number of young people 16-19 who are not in education, employment, or training.

## **Adult Social Care and Well-being**

This year's portfolio for adult care is focused on meeting the needs of Haringey's people. The overarching framework identifies many strategic priorities for improving the well-being of people in Haringey. The framework is designed to enable people to live independently for as long as possible in their own home. It is our belief that this will result in a strong community, as well as community partnerships.

Direct payments for Occupational Therapy Equipment have increased from 89 per 100,000 people to 132 adults and older people over the last year. Another way we are keeping people healthier is by ensuring that assessments and reviews are shared with service users and their caretakers. Hospital admissions will be reduced through the implementation of rehabilitative strategies. In addition, access to home care will be expanded to include all residents 18 and over. Citizens with learning disabilities will benefit from the 'Different Days' Strategy which will replace traditional, buildings-based day care with 'day opportunities' and more closely reflect people's aspirations.

In line with the aims of this paper, Adult Services will facilitate greater consolidation of NHS and local government work to tackle health inequalities and deliver better health and social care services. In the next year we will be working closely with our partners in Health, the Voluntary and Community Sector along with other Council services to meet the obligations of Haringey's Local Area Agreement.

## **Resources**

The resources portfolio is concerned with corporate property service and procurement, benefits and local taxation, corporate finance, HR, and risk management. All of these priorities are key to keeping Haringey up and running smoothly.

All service and community buildings (except leisure, housing, and schools) are now managed corporately on the basis of a clear landlord and tenant model. This new scheme has been implemented to improve health and safety and statutory compliance. In the upcoming year we have planned to review the commercial portfolio, specifically, to improve the contribution that our shops and industrial estates make to the Council. In the area of procurement, Haringey's new contract management system has gone live recently. The system will aid the council in the contract monitoring and will direct SAP/SRM shoppers to use contracts wherever possible. The 'Local Government Energy Procurement Action Plan' has been developed and implemented by the Haringey Corporate Procurement team and is being rolled to all London councils by CPU on behalf of the London Centre of Excellence.

The final arrangements for the partnership working initiative between Benefits and Local Taxation and the Pensions Services have been put in place. The aim of the partnership is to maximise income for customers through income for customers and to ensure that any changes in circumstances are reported to BLT at the earliest opportunity. This will serve to improve the accuracy of data collection and preventing unnecessary overpayments. Collection of council taxes remains a high priority. We plan further improvement on the collection performance target in 2007/08.

## **Leisure, Culture, Lifelong Learning Priorities**

This portfolio is aimed at improving the quality of life of all people living in Haringey. Our open space improvement programme will contribute to the Local Area Agreement implementation. One such project is to deliver major open space regeneration projects Markfield, Chestnuts, Belmont, and Lordship Recreation Grounds, with an investment of £4 million. Our action plan to enrich well-being at home, work, play, and learning will be driven through the Well-being Strategic Framework, in partnership with Haringey's Teaching Primary Care Trust.

Projects in this arena include maintaining our Youth Sports diversionary/ development programme, developing our Healthier Lifestyle programmes, and establishing a volunteer programme. Finally, this portfolio is committed to customer service and cost effectiveness. Our goals include completing the refurbishment of changing facilities at Park Road Leisure Centre and plant upgrades at both Tottenham Green and Park Road. We would also like to increase customer satisfaction in Sports and Leisure by 8% by 2010 and in Parks and Open Spaces by 5% by 2010.

### **Enforcement and Community Safety**

Safety is a top priority for the council, keeping the borough free of crime is very important for citizens and businesses. To maximize our effectiveness at keeping Haringey safe we will support the Safer and Stronger element of the LAA and stretch targets. Targets are the reduction of crime volume, reduced drug and alcohol abuse, prevention of domestic violence, and implementing RESPECT. The LAA will be refreshed during September and October of 2007. Gathering data and analyzing evidence for planning and commissioning for community safety will become a requirement under the review of the Crime and Disorder Act. Haringey has already produced its third joint report and is ahead of other London boroughs.

The residents of Haringey have said that improved communication, and consultation, and engagement with respect to enforcement issues would be appropriate. We agree and believe that this will also contribute to tackling fear of crime and improve confidence in the council. In addition, enforcement plans to promote links with regeneration, environment, and the Greenest Borough Strategy.

Other priorities include reducing the number of vulnerable victims like young victims and repeat victimizations. Restorative approaches such as school programmes, encouraging reporting, and implementing the Hate Crime and Harassment Strategy are strongly supported by the Metropolitan Police Authority.

### **THE ACTIVE CONTRIBUTION OF OVERVIEW AND SCRUTINY**

As stated previously the Cabinet has welcomed the involvement of Overview and Scrutiny in the work of the Council including the reporting of the recent reviews into Mental Health, Teenage Pregnancy, Youth re-offending, and Customer Services. These reviews constructively assisted the Cabinet with its work.

We are awaiting with interest the reviews regarding Extended Schools, CCTV, homelessness and trust that these will be completed shortly.

The Cabinet also seeks to encourage the input of Overview and Scrutiny in the successful progressing of the above key issues and would welcome the active and structured participation of Scrutiny colleagues in research and policy development, the way in which the Cabinet develops its strategic vision, and particularly advance and long-term consideration of items and issues contained in the Council's Forward Plan and through commissioning of relevant reviews, rather than simply monitoring the work of the Cabinet.

## **SUMMARY AND CONCLUSIONS**

We were elected in May 2006 on a platform of delivering better schools and better childcare, safer, brighter, and cleaner streets, a greener environment and value for money. As this document shows, we are confident of delivering those commitments and we are working hard to put in place the measures we want and need to take to secure Haringey's future.

This Cabinet is determined to work hard across the board to redistribute power, wealth and opportunity in our society, and to increase tolerance and respect in our communities. Our focus on education reflects our belief that it is through providing the best start for today's children that we can build a more equal and more prosperous borough.

But education is only a part of our wider agenda. This Council takes pride in devolving power to neighbourhoods, and we are keen to help local people to see the Council not just as a provider but as a partner in our efforts to transform the borough for the better.

Across the board, from improving Council housing to ensuring that Council services are first-rate for all who use them, our priorities and our work programme reflect our determination to push up standards and focus on delivery. Our methods for delivering our priorities, as much as our priorities themselves, reflect our ambition to work with, not just for, our residents and communities.

We are increasing our ability to organise services around local people and areas, rather than expecting Haringey residents to fit round Council services. From neighbourhood policing and the "Be++er Haringey" programme to our award-winning social services programmes, we are reshaping council services to work more closely with local communities and our strategic partners and work together with them to achieve common purposes.

Major regeneration projects such as the Haringey Heartlands project will showcase not only the success of this combined and co-ordinated approach but our determination to use that approach to deliver better housing, better schooling, better transport and better healthcare for the people of Haringey, within budget and representing excellent value for money.

I am confident that the immediate set of priorities I have outlined will take Haringey forward and help us make significant progress in implementing our work programme, as we work towards full implementation by 2009-2010.





May 7, 11:23 PM EDT

## WHO Criticized for Neglecting Evidence

By MARIA CHENG  
AP Medical Writer

LONDON (AP) -- When developing "evidence-based" guidelines, the World Health Organization routinely forgets one key ingredient: evidence. That is the verdict from a study published in The Lancet online Tuesday.

The medical journal's criticism of WHO could shock many in the global health community, as one of WHO's main jobs is to produce guidelines on everything from fighting the spread of bird flu and malaria control to enacting anti-tobacco legislation.

"This is a pretty seismic event," Lancet editor Dr. Richard Horton, who was not involved in the research for the article. "It undermines the very purpose of WHO."

The study was conducted by Dr. Andrew Oxman and Dr. Atle Fretheim, of the Norwegian Knowledge Centre for Health Services, and Dr. John Lavis at McMaster University in Canada. They interviewed senior WHO officials and analyzed various guidelines to determine how they were produced. What they found was a distinctly non-transparent process.

"It's difficult to judge how much confidence you can have in WHO guidelines if you're not told how they were developed," Oxman said. "In that case, you're left with blind trust."

WHO issues about 200 sets of recommendations every year, acting as a public health arbiter to the global community by sifting through competing scientific theories and studies to put forth the best policies.

WHO's Director of Research Policy Dr. Tikki Pang said that some of his WHO colleagues were shocked by The Lancet's study, but he acknowledged the criticism had merit, and explained that time pressures and a lack of both information and money sometimes compromised WHO work.

"We know our credibility is at stake," Pang said, "and we are now going to get our act together."

WHO officials also noted that, in many cases, evidence simply did not exist. Data from developing countries are patchy at best, and in an outbreak, information changes as the crisis unfolds.

To address the problem, they said, WHO is trying to develop new ways to collect information in poor regions, and has proposed establishing a committee to oversee the issuance of all health guidelines.

The Lancet study - conducted in 2003-04 through analyzing WHO guidelines and questioning WHO officials - also found that the officials themselves were concerned about the agency's methods.

One unnamed WHO director was quoted in the study as saying: "I would have liked to have had more evidence to base recommendations on." Another said: "We never had the evidence base well-documented."

Pang said that, while some guidelines might be suspect and based on just a few expert opinions, others were developed under rigorous study and so were more reliable.

For example, WHO's recent advice on treating bird flu patients was developed under tight scrutiny.

Oxman also noted that WHO had its own quality-control process. When its 1999 guidelines for treating high blood pressure were criticized for, among other things, recommending expensive drugs over cheaper options without proven benefit, the agency issued its "guidelines for writing guidelines," which led to a revision of its advice on hypertension.

"People are well-intended at WHO," Oxman said. "The problem is that good intentions and plausible theories aren't sufficient."

It remains to be seen how WHO's 193 member countries will react to The Lancet study, released just before WHO's governing body - the World Health Assembly - meets next week at U.N. headquarters in Geneva to decide future health strategies.

"If countries do not have confidence in the technical competence of WHO, then its very existence is called into question," said Horton, the journal's editor. "This study shows that there is a systemic problem within the organization, that it refuses to put science first."

WHO Director-General Dr. Margaret Chan, who took over the position this year, will be under pressure to respond to the study's criticism.

"We need a strong WHO," which in recent years "has seen its independence eroded and its trust diminished," Horton said. "Now is a fabulous opportunity for WHO to reinvent itself as the technical agency it was always meant to be."

Open Letter to Dr Mike Clark  
(Spokesperson for the Health Protection Agency – Radiation Protection Division)  
On the Subject of WiFi in Schools

15<sup>th</sup> June 2007

Dear Dr Clark

I'm writing to you in your capacity as spokesperson for the HPA-RPD in the hope of obtaining clarification on what appears to be an ambiguous position held by that body in respect of possible biological effects of WiFi signals – particularly in relation to usage in schools.

I note that the HPA website carries a page entitled 'WiFi Summary'. This appears to be a response to various recent media expressions of public concerns in respect of this technology, especially in respect of its possible impact on schoolchildren. The final sentence of that summary reads: *"There is no consistent evidence of health effects from RF exposures below guideline levels and no reason why schools and others should not use WiFi equipment."*

You will no doubt be aware that various public bodies, including notably local education authorities, take pronouncements by the HPA as the definitive statement on such matters; I was told as much just yesterday by representatives from a local authority department concerned with deployment of WiFi in schools. I understand that they take this position irrespective of any scientific evidence to the contrary, since yours is the government-appointed advisory body on such matters. It follows, whether you would wish it or not, that the HPA-RPD is answerable for national deployment of WiFi in schools.

I would now refer you to an observation made first in the Stewart Report (April 2000) and repeated by your organisation (under its former title of National Radiological Protection Board) in Autumn 2004. In the Executive Summary of your report 'Mobile Phones and Health', your Board stated:

*"The balance of evidence suggests that exposures to radiation below NRPB and ICNIRP guidelines do not cause adverse health effects to the general population.*

*"There is now scientific evidence, however, which suggests that there may be biological effects occurring at exposures below these guidelines.*

*"We conclude therefore that it is not possible at present to say that exposure to RF radiation, even at levels below national guidelines, is totally without potential adverse health effects, and that the gaps in knowledge are sufficient to justify a precautionary approach."*

It's most puzzling that the NRPB/HPA can (along with numerous others) recognise the existence of scientific evidence of biological effects below national guidelines, can explicitly acknowledge that exposures at levels below those guidelines may possibly lead to adverse health effects – and yet that same body can confidently assert, without any caveats, that *"there is ... no reason why schools and others should not use WiFi equipment."* This despite the fact that children were specifically identified in the Stewart Report as one of the groups most vulnerable to those possible adverse health effects. [It should be added that WiFi signals are very similar in nature and frequency to those considered in that Report].

I'm also more than a little puzzled at the fact that the NRPB/HPA recommends a Precautionary Approach specifically because the ICNIRP guidelines are potentially inadequate – but seems quite content for our government to use those suspect guidelines as their chosen 'precaution' against their own shortcomings!

As you know the ICNIRP guidelines provide effective protection against surface shocks and short-term heating effects – and only against those effects. Those biological effects at levels below ICNIRP are therefore, almost by definition, not thermal effects. This is explicitly recognized in the Stewart Report, which refers in places to evidence of biological effects at power levels *"too low to cause significant heating"* – if these were thermal effects then that heating would by definition be 'significant'.

This point is highlighted specifically in respect of WiFi by Professor Lawrie Challis, head of the government's Mobile Telecommunications Health Research programme. Professor Challis has recently been widely reported as advising against children using WiFi-enabled laptops on their laps. It's beyond doubt that every laptop in use in this country conforms with the ICNIRP guidelines and therefore poses absolutely no threat from any form of heat-based effect (Prof Challis is not reported as in any way suggesting that he was referring to illicit non-ICNIRP-compliant equipment).

It follows that the head of the MTHR programme, who has a very thorough knowledge of research in this field, apparently has concerns over possible non-thermal effects. Obviously any such effects will be totally different in terms of their action on living organisms from thermal effects, so any references to thermal-based guidelines are totally irrelevant to such a potential hazard. Even such terms as 'thousands of times below' have no meaning – think of size-based criteria to filter out threats from terrorists in the form of guns or bombs, then consider how effective such criteria might be against a virus attack.

It's also inappropriate, as has been done, to cast doubt on a potential hazard on the basis that no clear causal mechanism can be identified. Medical history is littered with such situations, for example the role of fleas on rats in the spread of bubonic plague was identified and addressed long before a causal mechanism was known. Likewise the HPA's repeated reference to "no **consistent** evidence" is wholly inappropriate: if ten young women had regular sexual relations with their partners for six months and at the end of that time five of them were pregnant and five were not, would the HPA regard that as 'inconsistent' and therefore question the causative role of those sexual activities in producing those pregnancies? There are countless other examples in the field of biological causation.

In short, if there is **any** plausible evidence of **any** non-thermal effects from this type of radiation – and there **are** peer-reviewed replicated studies showing such effects, some referred to in the Stewart Report – then non-thermal interaction of this type of radiation with living tissue becomes a possibility. At that point the ICNIRP guidelines become irrelevant, any supposed protection for ourselves and our children becomes a pious hope and the level of emissions which can be considered safe becomes anybody's guess.

In autumn 2004, when asked in a press interview "Are we all guinea pigs in some global multi-billion pound commercial experiment?", your response as quoted was "In a way, yes, we are." (Sunday Times, 3/10/04, referring to mobile telecommunications emissions very similar to those used in WiFi). Are we to understand that you and your colleagues at the HPA are in agreement with the nation's children becoming the youngest, arguably the most vulnerable and probably the most thoroughly exposed guinea pigs in that commercial experiment?

[I shall in due course copy this letter to a number of groups that share my concerns over these questions and will be most interested to know your response, which I will also copy to them all. As the spokesperson for an advisory body I'm confident that you'll be agreeable to your advice being disseminated in this way.]

Yours sincerely

***Dr Grahame Blackwell***

**PART 1**  
**Official advice on Wireless Networks (Wlan) and Children**  
**The Logic of the Stewart Report**

Here I want to show you that if you follow the logic of the Stewart Report, you will come to the conclusion that there shouldn't be any Wi-Fi in schools

1. Wi-Fi uses the same technology as mobile phone antennae. The radiation frequency used by the 3G network is 2.1GHz and of Wi-Fi 2.45 GHz.
2. This technology has never been pre-market tested and never been shown to be safe.
3. The UK Government's Spectrum Advisory Group recommended that wireless networks be used with the same precautions as recommended in the Stewart Report
4. The Stewart Report S1.42 states ... *the beam of greatest RF intensity.....should not be permitted to fall on any part of the school grounds or buildings without agreement from the school and parents*
5. The wireless routers are on and emitting radiation all day long inside the school.
6. It has been publicly shown on Panorama that the radiation intensity inside the classrooms of a school with Wi-Fi is the same or higher than as a result of being in the main beam from a mobile phone antenna.
7. Sir William Stewart said he did not want to see phone masts near schools. Logically, therefore, neither should Wi-Fi routers be inside schools
8. Application of the Precautionary Principle means that children should not be exposed to microwave radiation in their schools.

## **Official UK Sources of advice**

### **1. The Stewart Report, 2000**

In 2000, the UK Government set up a committee to look into the effects of microwave radiation. This resulted in the Stewart Report which recommended a precautionary approach due to the scientific uncertainties. The chairman was Professor Sir William Stewart, who is now chairman of the Health Protection Agency and was formerly Chief Scientific Adviser to the Government.

The Stewart Report is one of the most authoritative documents on this subject in the World and the most authoritative in the UK

Excerpts from the Stewart report 2000

<http://www.iegmp.org.uk/report/text.htm>

- 1.18 *There is now scientific evidence, however, which suggests that there may be biological effects occurring at exposures below these guidelines.*
- 1.19 *We conclude therefore that it is not possible at present to say that exposure to RF radiation, even at levels below guidelines, is totally without potential adverse health effects, and that the gaps in knowledge are sufficient to justify a precautionary approach.*
- 1.42 *... the beam of greatest RF intensity.....should not be permitted to fall on any part of the school grounds or buildings without agreement from the school and parents*
- 1.53 *...children may be more vulnerable because of their developing nervous systems, the greater absorption of energy in the tissues of the head... and a longer lifetime of exposure...*
- 6.41 *...On its own adoption of ICNIRP exposure guidelines will not allow fully for the current gaps in scientific knowledge and particularly the possibility of, as yet, unrecognised thermal or non-thermal adverse effects at lower levels of exposure....*
- 6.63 *There is evidence that at the frequencies used in mobile phone technology, children will absorb more energy per kilogram of*

*body weight from an external electromagnetic field than adults. ....a five year old around 60%. .... They will have a longer time to accumulate exposure over the course of their lives, and a longer time for any delayed effects of exposure to develop.*

*.6.67 ...responsibility for monitoring the requirements of 6.65 and 6.66 be given to local authorities...*

### **Research Evidence left out of the Stewart Report**

Many independent scientists think that the Stewart Report did not go far enough. It is also criticised for leaving out crucial pieces of evidence such as a piece of research from Latvia.

Motor and psychological functions of school children living in the area of the Skrunda Radio Location Station in Latvia

A. A. Kolodynski and V. V. Kolodynska

Institute of Biology, Latvian Academy of Sciences, 3 Miera Str.,  
Salaspils, LV-2121, Latvia

This paper presents the results of experiments on school children living in the area of the Skrunda Radio Location Station (RLS) in Latvia. Motor function, memory and attention significantly differed between the exposed and control groups. Children living in front of the RLS had less developed memory and attention, their reaction time was slower and their neuromuscular apparatus endurance was decreased.

[http://www.sciencedirect.com/science?\\_ob=ArticleURL&\\_udi=B6V78-3VWF8W2-D&\\_user=10&\\_coverDate=02%2F02%2F1996&\\_rdoc=1&\\_fmt=summary&\\_orig=browse&\\_sort=d&\\_view=c&\\_acct=C000050221&\\_version=1&\\_urlVersion=0&\\_userid=10&md5=6b5c7db617f2ac5f55722daf3714519f](http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6V78-3VWF8W2-D&_user=10&_coverDate=02%2F02%2F1996&_rdoc=1&_fmt=summary&_orig=browse&_sort=d&_view=c&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=6b5c7db617f2ac5f55722daf3714519f)

The signals from this transmitter were pulsed and of a similar intensity to that which children exposed to Wi-Fi would be subjected to. The NRPB which supplied the evidence to the Stewart Committee claimed this paper was unavailable and unpublished. It was later found to be published and available on the internet!

## 2. DfES

The DfES repeats this guidance on phones and phone masts that was made in the Stewart Report.

<http://www.teachernet.gov.uk/management/atoz/m/mobilephonesandbasestations/>

## 3. UK Government's Spectrum Advisory Group

The UK Government's Spectrum Advisory Group recommended that wireless networks be used with the same precautions as recommended in the Stewart Report

<http://www.ofcom.org.uk/static/archive/ra/smag/members.htm>

## 4. In 2004 Sir William Stewart updated his report

[http://www.hpa.org.uk/radiation/publications/documents\\_of\\_nrpb/abstracts/absd15-5.htm](http://www.hpa.org.uk/radiation/publications/documents_of_nrpb/abstracts/absd15-5.htm)

Quote from the updated report:

16. *“Sixth, IEGMP considered that children might be more vulnerable to any effects arising from the use of mobile phones because of their developing nervous system, the greater absorption of energy in the tissues of the head and a longer lifetime of exposure. Data on the impact on children have not yet been forthcoming. The potential for undertaking studies to examine any possible effects on children, however, are limited for ethical reasons.”*

In interviews after this update Sir William said he is now more worried than he had been in 2000.

<http://www.timesonline.co.uk/article/0,,8122-1436543,00.html>

He mentioned in particular, 4 new studies that worried him as follows:

### a. One ten-year study in Sweden

#### **Mobile Phone Use and the Risk of Acoustic Neuroma.**

**Lonn S, Ahlbom A, Hall P, Feychting M**

**Epidemiology. 15(6):653-659, November 2004** Data showed an increased risk of acoustic neuroma associated with mobile phone use of at least ten years duration.

<http://electricwords.emfacts.com/lo169623.html>



**b. A Dutch study (TNO)** had suggested changes in cognitive function.

<http://www.gr.nl/pdf.php?ID=1042>

The radiation frequency used (2.1 GHz) was similar to that used by Wi-Fi (2.45 GHz) and the intensity was 1 v/m, similar to that experienced by children in their classrooms. With Wi-Fi

**c. The Naila Study**, Germany: 10-year Study of Residents near Mobile Telephone Mast . The radiation levels are similar to those from a Wifi network.

1000 case notes were studied of patients living within 400m of the mast for 10 years. The doctors found a trebling of cancer risk after 5 years exposure.

(<http://www.tetrawatch.net/papers/naila.pdf>)

**d. REFLEX REPORT 2004.** Confirmed double strand DNA breaks in human cells amongst other findings.

[http://www.powerwatch.org.uk/news/20041222\\_reflex.asp](http://www.powerwatch.org.uk/news/20041222_reflex.asp)

*Twelve institutes in seven countries have found genotoxic effects and modified expressions on numerous genes and proteins after Radio frequency and extremely low frequency EMF exposure at low levels, below current international safety guidance, to living cells in-vitro. These results confirm the likelihood of long-term genetic damage in the blood and brains of users of mobile phones and other sources of electromagnetic fields. The idea behind the REFLEX study was to attempt replicate damage already reported to see if the effects were real and whether, or not, more money should be spent of research into the possible adverse health effects of EMF exposure. They concluded that in-vitro damage is real and that it is important to carry out much more research, especially monitoring the long-term health of people.*

[http://www.itis.ethz.ch/downloads/REFLEX\\_Final%20Report\\_171104.pdf](http://www.itis.ethz.ch/downloads/REFLEX_Final%20Report_171104.pdf)

<http://www.verum-foundation.de/cgi-bin/content.cgi?id=euprojekte01>

## **5. UK Department of Health**

The UK Department of Health advice to parents about mobile phones includes the following -

*There are significant gaps in our scientific knowledge.*

*The expert group has therefore recommended that in line with a precautionary approach, the widespread use of mobile phones by children (under the age of 16) should be discouraged for non-essential calls.*

*The UK Chief Medical Officers recommend that if parents want to avoid their children being subject to any possible risk that might be identified in the future, the way to do so is to exercise their choice not to let their children use mobile phones*

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4009248](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4009248)

## **6. Professor Challis, Chairman MTHR**

Professor Challis (vice-chairman of the Stewart Report and chairman of the Government's MTHR) recently stated that children should not put wifi enabled laptops on their laps. He also said that at 2cm distance from the laptop antennae the fields were equal in strength to a mobile phone, and he continues to say that primary school children should not be using a mobile phone at all.

<http://www.telegraph.co.uk/news/main.jhtml;jsessionid=PXNHYNH3RSJFDQFIQMFCFGGAVCBQYIV0?xml=/news/2007/04/28/nesmog28.xml>

There are many more studies looking at the effects of microwave radiation, too many to mention here.

**PART 2**

**Why the Health Protection Agency advice on Wi-Fi cannot be relied upon**

I want to show that the guidelines and opinions currently offered by the HPA on the health effects of Wi-Fi are flawed. The reasons are:

1. The HPA downplay evidence of health damage by carefully chosen responses, misleading statements and clever manipulation of the evidence.
2. The guidelines themselves set up by the ICNIRP are only intended to protect against short term (6 minutes) heat shocks and burns. They do not protect against long term 'low' level exposure.  
<http://www.icnirp.de/documents/emfgdl.pdf> .  
The HPA are still basing the whole of their 'safety' advice on these out of date and inappropriate guidelines.
3. Most astonishing of all, the HPA's very own Chairman, Sir William Stewart, has been publicly calling for caution in the role-out of this technology, and even wants an investigation into Wi-Fi in schools – he is now at odds with his own organisation which should make people think twice before relying on the HPA advice. He also stated that the WHO recommendations are not an accurate reflection of the science. This is in line with a growing body of scientists who have done research in this area.
4. The NRPB is half funded by the phone industry and is now part of the HPA
5. All agencies whether it be BECTA, the Departments of Health or of Education, rely upon the HPA.

**UK media and the Wi-Fi debate**

The Times started the debate on Wi-Fi in schools in November last year when it reported that schools were dismantling Wi-Fi at the request of parents who had become aware of the research and the fact that the ICNIRP guidelines which the UK subscribe to are only intended to protect against short term heating effects despite the fact that there is much evidence for other biological effects at exposures below these guidelines as evidenced in the Stewart Report

<http://www.timesonline.co.uk/article/0,,2-2461748.html>

[http://www.timesonline.co.uk/tol/life\\_and\\_style/health/features/article665419.ec](http://www.timesonline.co.uk/tol/life_and_style/health/features/article665419.ec)  
[e](#)

In April, the Sunday Independent leaked the fact that Panorama had staged a 'coup', an interview with the rarely seen and most eminent establishment scientist, Sir William Stewart, Chairman of the Health Protection Agency, HPA.  
<http://news.independent.co.uk/health/article2472133.ece>  
<http://news.independent.co.uk/health/article2472140.ece>  
<http://news.independent.co.uk/health/article2472139.ece>  
[http://comment.independent.co.uk/leading\\_articles/article2472074.ece](http://comment.independent.co.uk/leading_articles/article2472074.ece)

It was interesting that after this leak, the HPA web site proclaimed that Sir William had not said what the paper claimed he had said, namely that Sir William is calling for an investigation into the effects of Wi-Fi on children in schools! This was a month before the programme was aired. See appendix 2 for transcript of Sir William's statements

This is what appeared on the HPA web site:

### **Health Protection Agency statement - 22 April 2007**

(bold- my emphasis)

*The **statements** attributed to Sir William Stewart, Chairman of the Health Protection Agency (HPA), in The Independent on Sunday **are not his**. Sir William is being pressed by lobbyists to condemn Wi-Fi and is unprepared to do so. He has not taken a position on Wi-Fi.*

*Wi-Fi devices are of very low power, much lower than mobile phones. The HPA and Sir William have always pressed for more research into these new technologies. The only firm precautionary advice issued by the HPA is about children's use of mobile phones.*

However just before Panorama was shown on 21st May 2007, this statement was removed and another put in its place. Its just as well as anyone who saw the programme would plainly see Sir William calling for an enquiry!! Thus its obvious that the HPA is misleading the public on this issue!

### **HPA statement - 18 May 2007**

*WiFi Summary*

*Basics*

*WiFi is short for Wireless Fidelity and is a particular type of wireless local area network (WLAN) - i.e., you don't need to plug your computer into a phone network via a cable. There are many types of WLAN but all of them allow two or more computers to form a network using radio frequency (RF) signals. They allow users to access and share data, applications, internet access or other network resources in the same way as wired (cable) systems.*

*Health concerns and HPA advice*

*There is no evidence to date that exposure to the RF signals from WiFi and WLANs adversely affect the health of the general population. In addition, HPA advice is:*

*\* The signals from WiFi are very low power, typically 0.1 watt (100 milliwatts) in both the computer and the mast (or router) and*

*resulting exposures should be well within internationally accepted guidelines.*

*\* The frequencies used are broadly the same as those from 'traditional' RF applications.*

*\* Based on current knowledge, RF exposures from WiFi are likely to be lower than those from mobile phones.*

*Conclusion*

*On the basis of current scientific information WiFi equipment satisfies international guidelines. There is no consistent evidence of health effects from RF exposures below guideline levels and therefore no reason why schools and others should not use WiFi equipment .*

The HPA received a number of letters from various groups pointing out that the website was now misleading as it did not accurately reflect the views of its Chairman as expressed on Panorama.

A couple of weeks later, the statement changed again making the concession from 'no evidence' to 'no consistent evidence' referring to the general population and adding a paragraph relating to Sir William Stewart as follows:

[http://www.hpa.org.uk/radiation/understand/radiation\\_topics/emf/wifi.htm](http://www.hpa.org.uk/radiation/understand/radiation_topics/emf/wifi.htm)

**Current HPA statement**

WiFi Summary

*General position*

*There is **no consistent evidence to date** that WiFi and WLANs adversely affect the health of the general population.....*

*On the basis of the studies so far carried out in house, the Agency sees no reason why WiFi should not continue to be used in schools. However with any new technology it is a sensible precautionary approach, as happened with mobile phones, to keep the situation under ongoing review so that parents and others can have as much reassurance as possible. That is why **our Chairman, Sir William Stewart, has stated it would be timely to carry out further studies as this new technology is rolled out.** The Health Protection Agency is discussing this with relevant parties.*

*Basics*

.....  
*Key Points*

*\* There is **no consistent evidence to date** that exposure to RF signals from WiFi and WLANs adversely affect the health of the general population*

.....  
*\* The frequencies used are broadly the same as those from **other RF applications such as FM radio, TV and mobile phones***

.....  
For a line by line criticism of the HPA position please see appendix 1 below  
<http://www.hese-project.org/hese-uk/en/niemr/news.php?id=wifinews>

The HPA is still relying on the WHO/ICNIRP guidelines despite the fact that its Chairman stated that these guidelines are wrong. Thus the whole HPA statement goes out the window!

### **A importance of the Panorama programme**

You can see Panorama online at:

<http://news.bbc.co.uk/1/hi/programmes/panorama/6674675.stm>

The programme has been criticised by the industry and in certain parts of the media, This is only to be expected given the economic power of the industry. The government also get £15 billion a year in tax revenue from the multi £billion industry.

The programme interviewed scientists all of whom are leading experts in research into effects from microwave radiation. It also featured Dr Repacholi, the founder of ICNIRP and former head of the WHO EMF Project as well as Sir William Stewart. In the programme Sir William Stewart openly criticised the WHO and its advice for the first time ever. However it is in the interests of the industry and certain parts of the media (including most of the rest of the BBC!) that the programme would not be widely watched. The Guardian, for example, heavily criticized the programme BEFORE its broadcast, without even mentioning the appearance of Sir William in the programme.

BBC News has shown bias towards the industry by cherry picking industry supporting scientists when presenting commentary on the news. Often these scientists are physicists or engineers, who have no knowledge of cell biology, yet they are presented as experts on the potential biological health risks, on which they have done no research themselves.

The criticisms of the programme centre around the measurement taken in schools with 15 laptops all on and connected to the internet. The radiation level in the classroom was found to be equivalent to 3 times the level in the main beam from a nearby phone mast. The criticism was that the comparisons were not taken at equal distances from both apparatus. However the point is to measure the radiation where the children will be sitting. They do not sit 1m from a phone mast/antenna!

What the programme didn't focus on were the permanent radiation levels emitted by the Wi-Fi routers in the school. They are on and radiating all day long inside the school, exposing the children and teachers to similar levels as those from a mast. When the laptops are in use, the levels go up to over 3 times that from the main beam of a mast.

**The point is that The Stewart Report S1.42 said that schools should not be in the main beam from a mast.**

### Epidemiological evidence

There is epidemiological evidence from Germany and Israel of a trebling of cancer incidence after 10 years in the main beam from phone masts. The UK government refuses to do any epidemiological research and so we only have anecdotal evidence of increases of cancer around phone masts and also in teachers in schools in the main beam from phone masts. All these can be criticised as they are not 'properly' conducted pieces of research, and this is how the government wants them to remain.

<http://www.tetrawatch.net/papers/naila.pdf>

[http://www.powerwatch.org.uk/news/20050207\\_israel.pdf](http://www.powerwatch.org.uk/news/20050207_israel.pdf)

<http://www.timesonline.co.uk/tol/news/uk/article1687491.ece>

<http://www.timesonline.co.uk/tol/news/uk/article1687491.ece>

### **Is Dr Clark (HPA spokesman) misleading the public?**

Dr Clark Quote from the Times 11 Dec. 2006 by Nicki Daniels

*" When we have conducted measurements in schools, typical exposures from wi-fi are around 20 millionths of the international guidelines levels of exposure to radiation. As a comparison, a child on a mobile phone receives up to 50 per cent of guideline levels. So a year sitting in a classroom near a wireless network is roughly equivalent to 20 minutes on a mobile. If wi-fi should be taken out of schools, then the mobile phone network should be shut down, too - and FM radio and TV, as the strength of their signals is similar to that from wi-fi in classrooms."*

[http://www.timesonline.co.uk/article/0,,8123-2495352\\_1,00.html](http://www.timesonline.co.uk/article/0,,8123-2495352_1,00.html)

### NOTE

UK (ICNIRP) guidelines are 10 W/m<sup>2</sup> and Wifi readings are about 0.001 W/m<sup>2</sup> across the classroom. This makes 0.01% of the guidelines, not 20 millionths!! Clearly therefore Dr Clark's statement is untrue.

[http://www.powerwatch.org.uk/news/20070518\\_wifi\\_panorama.asp](http://www.powerwatch.org.uk/news/20070518_wifi_panorama.asp)

18/5/07 Powerwatch comments on Dr' Clark's statements

### Exerpt

*Powerwatch believes that the comments by HPA spokesman, Dr Mike Clark, that a 20 minute mobile phone call gave as much exposure as a year in a wLAN classroom is complete rubbish. Powerwatch's measurements and calculations suggest that a typical 20 minute mobile phone call would cause a similar exposure from a few hours up to one day in the classroom. The current*

*Department of Health Chief Medical Officers' advice is that children and young people should only use a mobile phone for really important calls, and yet here we are forcing our youngsters into almost full-time exposure at school to such pulsing microwave radiation. This is irresponsible and could even be seen as possible child abuse.*

Its interesting to note that the Salzburg guidelines for indoor exposure set a limit of 0.0000011 W/m<sup>2</sup>. Thus the emissions from WiFi are 1000 times higher than the Salzburg guidelines! (NB. Microwave radiation from WiFi or phone masts is trillions of times higher than the naturally occurring background levels that were there up until 15 years ago when these systems were rolled out)



## APPENDIX 1

Dr Goldsworthy statement in response to the statement on Wi-Fi in schools from the HPA

<http://www.hese-project.org/hese-uk/en/niemr/news.php?id=wifinews>

**There is no evidence to date that exposure to the RF signals from WiFi and WLANs adversely affect the health of the general population.**

**There can be no laboratory evidence that human health is affected by wireless networks because the necessary experiments have not been done, nor have studies been made of chronic exposure of individuals to the radiation from mobile phones. However, several international studies suggest that they pose a significant threat to health.**

**Also, a number of individuals have presented credible accounts of how they have been personally affected by the introduction of wireless networks and these cannot be ignored.**

**Any assertion that wireless networks (WLAN) must be safe because not everyone shows obvious physical symptoms, ignores the well-being of those that do. Also, these symptoms could be an early indicator of underlying damage that may eventually affect the remainder of the population.**

**The signals from WiFi are very low power, typically 0.1 watt (100 milliwatts) in both the computer and the mast (or router) and resulting exposures should be well within internationally accepted guidelines.**

**Also, the international guidelines are not appropriate. Only acute short-term exposures to unmodulated microwaves are covered. This clearly does not apply to chronic exposure to low-level digital communications as used in wireless networks.**

**It is also an undeclared assumption in this statement that the only harmful effects of non-ionising radiation are due to heating. Frequency, waveform and quantum effects are completely ignored, even though these are established features of normal bio-electromagnetic responses in living organisms such as humans.**

**The frequencies used are broadly the same as those from 'traditional' RF applications.**

**'Traditional' has no meaning: tradition is a subjective comparison without content, and the assumption is that carrier frequencies are the only relevant parameter. WiFi is indeed part of the IEE 802.11 standard, and the carrier frequencies are similar to those used by mobile phones. The comparison is clearly intended to suggest that everything else has a clean bill of health, and this is not the case.**

The frequencies and signals used by WiFi *are* similar to those used by mobile phones, and recent studies have shown these to be genotoxic, and are associated with an increased risk of cancer and a loss of fertility

**Based on current knowledge, RF exposures from WiFi are likely to be lower than those from mobile phones.**

Again this statement is imprecise at best. Current knowledge is not so poor that we do not know what a classroom exposure regime is like. Nor is it a valid comparison to set wireless networks against mobile phones. The comparison is intended to suggest that even if there is a doubt about excessive mobile phone use, there can therefore be no doubt about wireless networks. If there is a doubt about phones (and there is substantial doubt) the underlying assumption is that they can only be harmful on the scale of energy absorption. This is an unwarranted assumption given findings from research into modulation frequency and waveform effects on living organisms.

**On the basis of current scientific information WiFi equipment satisfies international guidelines. There is no consistent evidence of health effects from RF exposures below guideline levels and therefore no reason why schools and others should not use WiFi equipment.**

It does not take much scientific information to see that the international guidelines for exposure greatly exceed any likely exposure in a classroom. But as shown above, the issue of the relevance of those guidelines must be in considerable doubt.

The 'consistency of evidence' is a function of the underlying assumption of experimental conditions (ie, which parameters matter), and of what constitutes a 'health effect', not just a physiological response (HPA always cites sight as a harmless EMF bio-response). 'RF exposures below guidelines' is an uninformative broad generalisation of what factors have been examined. Some studies do indeed show a highly consistent effect on specific cell physiology, for example, in cases where that effect is highly significant for health effects.

This statement therefore appears to acknowledge that indeed evidence does exist of adverse health effects, somewhat in contradiction of the first point in the HPA statement.

It is a complete *non sequitur* that there is 'therefore no reason' for schools to avoid wireless networks.

### **h.e.s.e.-UK conclusion:**

The evidence is there, the consistency in research is there, the inadequacy of exposure guidelines is clear. And in the face of all this, it is deemed wise to chronically expose children and teachers while discussions continue, and while a perfectly acceptable alternative (wired network points) exists.

**If a new drug were to be discovered that caused similar symptoms in even a minority of patients, it would probably be taken off the market and certainly not used for regular mass medication. On this basis, the case for the safe universal use of WiFi in schools has not yet been made and it would be wise to withdraw it pending further independent laboratory trials.**

**Failure to do this might call into question the mandate of the Health Protection Agency as a truly 'independent body that protects the health and well-being of the population'.**

**(h.e.s.e.-UK is represented at the HPA EMF Discussion Group: minutes [here](#)**

**[http://www.hpa.org.uk/radiation/understand/radiation\\_topics/emf/emfdg/index.htm](http://www.hpa.org.uk/radiation/understand/radiation_topics/emf/emfdg/index.htm))**

***Addendum:* Since the Panorama programme elicited such a response, including a substantial number of people removing domestic wireless networking, the following was added by the HPA to their statement:**

**'However with any new technology it is a sensible precautionary approach, as happened with mobile phones, to keep the situation under ongoing review so that parents and others can have as much reassurance as possible. That is why our Chairman, Sir William Stewart, has stated it would be timely to carry out further studies as this new technology is rolled out. The Health Protection Agency is discussing this with relevant parties.' [h.e.s.e.-UK remains unclear as to what kind of precautionary approach at all has been adopted with regard to mobile phones.]**

## APPENDIX 2

To view the whole programme or the transcript click

<http://news.bbc.co.uk/1/hi/programmes/panorama/6674675.stm>

(If you have problems we can provide a copy)

### EXCERPTS FROM PANORAMA transcript

*KENYON: Sir William Stewart has a pedigree it would take a bold politician to ignore. Chief Scientific Adviser to Margaret Thatcher, and then called upon by Tony Blair's government in 2000 to examine mobile phones, masts and their impact on our health. After looking at the evidence for a year, he couldn't rule out the possibility there may be biological effects.*

***STEWART: It means that basically there may be changes for example in cognitive function. Secondly there was some indications that there maybe cancer inductions. Thirdly there were some molecular biology changes within the cell and these were issues that we had to bear in mind as one came to one's broad conclusions.***

*KENYON: The report made a raft of recommendations. At the heart of it the question that had been worrying so many - should our children be exposed to mobile phone masts? Sir William was concerned enough to recommend what he called: "a precautionary approach."*

*STEWART: We recommended, because we were sensitive about children that masts should not necessarily impact directly on areas where children were exposed, like playgrounds and that.*

*KENYON: The government knows Sir William has concerns about siting masts near schools. Why then are we now placing them inside classrooms in the form of wi-fi mini masts? They emit the same sort of radiation, so what's its potential impact in the classroom. We went to a school in Norwich to find out. The idea to compare the level of radiation from a typical mobile phone mast with that of a wi-fi enabled laptop in the classroom.*

Xxxxxxxxxxxxxx

***KENYON ..... In Swedish schools, even if there's only one person apparently affected by wi-fi the system is removed and the classroom shielded. You'd think our government would base its decisions on the advice of their top man, the one it employed to protect our health, Sir William Stewart, but instead it seems to have turned to others. **First the World Health Organisation. It's robust in its language saying there were no adverse health effects from low level long-term exposure.*****

***Is that an accurate reflection of the science do you think?***

**STEWART: I think they are wrong.**

*KENYON: How are they wrong?*

*Sir WILLIAM STEWART Chairman, Health Protection Agency **Because there is evidence, and the Stewart Report pointed out some of that evidence.***

*KENYON: So why do you think it is that the WHO, one of the most influential public health bodies in the world continues to put out that message?*

**STEWART: I think that they've got to review the statement that they're making.**

*KENYON: But in your view, not an accurate reflection of the science that's out there?*

**STEWART: I think it is not an accurate reflection.**

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

*KENYON: We asked the government for an interview about all this. It said no and referred us instead to the Health Protection Agency. The Chairman of that is.... hang on a minute - it's Sir William Stewart! The very man who has indicated to Panorama just how uncomfortable he feels about the speed with which wi-fi is being rolled out.*

**STEWART: I believe that there is a need for a review of the wi-fi and other areas.**

*KENYON: How important is it to do that swiftly?*

**STEWART: I think it's timely for it to be done now.**

*KENYON: If it's not?*

*STEWART: Who knows?*

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**PART 3**

**If we cannot rely upon the HPA, who can we rely on for evidence and what are other official bodies doing?**

There are other authoritative bodies and independent scientists one can look to as follows:

**1. The International Commission for Electromagnetic Safety, ICEMS**

This body was set up specifically to look at the safety issue of non-ionising radiation such as that used in mobile phone and WiFi technology.

In September last year, 47 scientists signed a resolution in Benevento, Italy.

<http://www.icems.eu/>

Excerpts as follows:

*3. There is evidence that present sources of funding bias the analysis and interpretation of research findings towards rejection of possible public health risks*

*4. Arguments that weak (low intensity) EMF cannot affect biological systems do not represent the current spectrum of scientific opinion*

*5.....biological effects can occur from exposures to both extremely low frequency fields and radiation frequency fields. Epidemiological and in vivo as well as in vitro experimental evidence demonstrates that exposure to some ELF EMF can increase cancer risk in children and induce other health problems in both children and adults.....*

*6. We encourage governments to adopt a framework of guidelines....that reflect the Precautionary Principle, as some nations have already done. (The Precautionary Principle shifts the burden of proof to those who discount a risk) These strategies should include:*

*6.1. Promote alternatives to wireless communication systems e.g. ...use of fibre optics and coaxial cables....*

**2. Examples of advice by foreign health authorities and local authorities**

**The Public Health Dept of the Salzburg Government** has issued advice not to use WLAN in schools and nurseries.

[http://www.buergerwelle.de/pdf/wlan\\_dect\\_in\\_schools\\_and\\_kindergardens.pdf](http://www.buergerwelle.de/pdf/wlan_dect_in_schools_and_kindergardens.pdf)

A year ago the **Frankfurt Local Education Authority** banned wireless networks in schools as they 'did not wish to conduct a „large scale human experiment“

<http://omega.twoday.net/stories/3974159/>

In March this year the **Bavarian Parliament** issued a recommendation to all schools in the land to not install wireless LAN networks.

### **3. Teachers and Doctors speak out against WiFi**

#### **German Teachers Union**

There had already been a prior warning from the German Teachers Union (GEW) not to put WiFi in schools after they had reviewed the Ecolog report.  
<http://omega.twoday.net/stories/1755556/>

The Ecolog Report was a review of 220 pieces of peer reviewed and published research showing clear evidence for cancer and genetic damage. This review was paid for by T Mobile and published in 2000, Its recommendations went further than those of the Stewart Report and called for the ICNIRP guidelines to be reduced by a factor of 1000.

<http://www.hese-project.org/hese-uk/en/niemr/ecologsum.php>

#### **Professional Association of Teachers**

Philip Parkin, General Secretary of the Professional Association of Teachers (PAT), said: "I have concerns about the health of both pupils and staff.

"I am concerned that so many wireless networks are being installed in schools and colleges without any understanding of the possible long-term consequences.

[http://www.pat.org.uk/index.cfm/page/\\_sections.contentdetail.cfm/navid/11/parentid/0/sa/17/id/278](http://www.pat.org.uk/index.cfm/page/_sections.contentdetail.cfm/navid/11/parentid/0/sa/17/id/278)

These concerns were raised after one of his members, a teacher at Stowe collapsed when WiFi was installed in his classroom. It had to be removed. There are reports of other teachers ill because of WiFi, let alone the pupils.

#### **Doctors Appeals to Government**

175 German doctors have signed the Bamberger appeal

<http://omega.twoday.net/stories/838705/> citing wLAN as one of the causes of ill health seen in their patients. They conclude:

'...From a medical viewpoint, we are seeing an emergency situation, which requires rapid action by all political means.

I implore you to take action to avoid health damage among many children, young people and adults.

Faithfully

Dr. Cornelia Waldmann Selsam'

There are many more independent scientists that also advocate cables instead of WiFi in schools as a precautionary measure. Dr Carlo, Prof Johansson, Dr Santini, Prof Henshaw, Dr Blackwell, Dr Goldsworthy, Dr Mae-wan Ho, Dr Curry, Dr Havas, Dr Oberfeld, Dr Hyland, Dr Dring, Prof Lai to name but a few.



#### **4.Exposure guidelines**

The ICNIRP guidelines, endorsed by the WHO and to which the UK subscribe are not accepted by all countries, notably Russia and China whose guidelines are lower by a factor of 100.

The Salzburg Public Health Department have the lowest guidelines in the World. Some 10,000,000 times lower than ours!

Wi-Fi operates way above the Salzburg guidelines for indoor exposure and near the routers or laptops, above the Russian and Chinese guidelines.

<http://www.powerwatch.org.uk/gen/intguidance.asp>

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## WI-FI IN THE CLASSROOM: HEALTH ADVICE TO SCHOOLS

### 1. General

Until further research has been undertaken into the health effects of wi-fi, especially on children, it is recommended that it should not be used in schools. Studies of similar types of radiation, both epidemiological and mechanistic, over several decades have shown serious health effects on the general population.

### 2. Schools with wi-fi in classrooms already

Where it is impossible to switch from wireless to cabled networking immediately, the following actions are recommended.

*(a) Measure the levels of radiation*

The strength of radiation in a classroom will vary according to the relative position of laptops and transmitting nodes. Emissions can reflect off surfaces or pass straight through walls to create particular hot-spots. Once measurements have been taken it should be possible to reduce hot-spots by moving the location of and/or turning down appropriate transmitters/nodes. Records of measurements (peak pulses) and changes should be kept.

*(b) Sign the radiation areas*

Pupils, staff and visitors sensitive to electro-magnetic radiation should be made aware of which classrooms and areas have wi-fi. A delineated map of the school is usually helpful.

*(c) Make provision for sensitive pupils and staff*

Pupils and staff sensitive to electro-magnetic radiation should be able to use cabled network connections and be shielded from wi-fi radiation.

*(d) Train staff in observing warning signs of sensitivity*

Some pupils and staff are likely to become increasingly sensitised to electro-magnetic radiation (EMR), given the cumulative and chronic nature of effects resulting from exposure to it. Staff should therefore be alerted to symptoms typically induced by exposure to EMR, such as headaches, dizziness, pains in the skin and muscles, asthmatic conditions, concentration and memory problems, sleeplessness and fatigue. Medical help should be sought when such symptoms seem to relate to exposure to EMR and the pupil or teacher should be removed from the source of EMR. This is of crucial importance in preventing the development of the debilitating condition of Electro-Hyper-Sensitivity, for which there is no cure at present.

*(e) Inform parents*

Literature for parents should explain the school's policy on wi-fi. Arrangements should be made for children to be kept away from exposure to wi-fi EMR at parents' request.

*(f) Check insurance*

Some concerns have been raised as to whether liability to the known health effects of EMR exposure is covered by all forms of educational insurance.

### 3. Schools which do not have wi-fi in classrooms

Schools which do not have wi-fi (wLAN) in their classrooms should adopt a precautionary approach, such as that advocated for children with regard to exposure from radiation by mobile phones. This requires that no child under the age of 8 should be exposed to wi-fi electro-magnetic radiation. Older children should be exposed only in an emergency. It should be noted that some European countries use the age of 16 rather than 8.

The consequence of such a precautionary approach is that wi-fi is inappropriate for infant, primary and most secondary schools or colleges. Use and exposure in secondary schools could depend on pupil age but, to avoid known health risks, a wired solution is highly preferable. Where pupils are under 18, schools and parents should see their duty of care as protecting children from avoidable radiation.

**Appendix: notes****1. Health studies**

Health studies on specifically wi-fi radiation have not yet been made, but the pulsed microwaves used are similar to those for mobile phones and seem to have similar health effects to other forms of EMR. These have been studied for the general population but not often specifically as regards children. The Schwarzenburg study (1995) showed among the general population health problems with concentration, fatigue, sleep, depression and cardiovascular conditions, all typical symptoms of sensitivity to EMR, at EMR exposures down to 0.05 V/m. The Oberfranken study (2005) showed typical sensitivity symptoms in 30% of people at under 0.06 V/m, and 95% in the range 0.2 – 0.6 V/m. The Naila study (2004) showed that cancer rates are trebled within 400 metres of a mobile phone mast at 0.6 V/m in a dose-response relationship after 5 years' exposure, and the Netanya study (2004) showed female cancers increased ten times within 350 metres of a mast.

**2. Radiation intensity**

A laptop (100 or 200 mW WLAN cards) can emit radiation with electric fields of 4.0 - 6.0 V/m at its transmitter, 1.1 - 4.9 V/m at 50 cm, a typical sitting distance, and 0.7 - 2.8 V/m at 1 m. In a classroom with 30 laptops transmitting, the electric field could be greater. In comparison, mobile phones can reduce their emissions during a call down to about 0.0002 V/m. Even so, some studies suggest that mobile phone use can determine the side of the head in which tumours can appear after 10 years.

**3. Sensitivity**

Much of the damage from low levels of EMR to human cell tissue appears to be cumulative and thus the symptoms may not be felt for many years. A child's cell tissues in the head are said to absorb 60% more radiation from a mobile phone than an adult's. Wi-fi radiation affects the whole body surface and not just the head. Since the development of digital transmissions, the number of people becoming sensitised to EMR has grown rapidly. Although it is likely that all human beings are subconsciously sensitive, in that the existing electrical fields within their cell tissues are influenced by external fields, most humans are not yet aware of how the typical sensitivity symptoms relate to exposure from EMR. In Sweden about 3.1% of the population may suffer from Electro-Hyper-Sensitivity.

**4. Guidelines****(a) Thermal (heating)**

UK government guidelines on limits (41 V/m at 2.4 GHz) are only to avoid heating human tissue more than 1 degree, based on the Specific Energy Absorption Rate (SAR).

**(b) Non-thermal (below heating levels)**

Salzburg sets the non-thermal indoor limit at 0.02 V/m (peak pulse). This is to help protect people from non-thermal or bioelectromagnetic effects of EMR, such as DNA damage, cancer growth, and fertility and neurological problems. Salzburg's Public Health Department warns against wireless systems and DECT phones in schools and nurseries. The UK does not have any non-thermal guidelines.

**(c) Peak pulse measurements**

Many scientists think the peak level of the radiation pulses is particularly dangerous. For WLAN (wi-fi), the difference between the base and peak levels is 1,000 times (DECT phones: 100 times) of the power flux density. Therefore measuring the average level or the root mean square (RMS) is inadequate.

**5. Measurements at a Norwich school on a Panorama programme (BBC1, 21.5.07)**

(a) 100 m from the phone mast: peak readings of 0.7 V/m

(b) 50 cm from the laptop: peak readings of 1.7 V/m

using a Gigahertz HF59B broadband HF analyser.

**References for note 1:**

*Schwarzenburg study*, Switzerland: Abelin, T. et al., 'Study of health effects of the Shortwave Transmitter Station of Schwarzenburg, Berne, Switzerland,' University of Berne, Institute for Social and Preventative Medicine, *Bundesamt für Energiewirtschaft Schriftenreihe Studie*, 56, 1995.

*Oberfranken study*, Germany: Bamberg doctors' Report and Appeal, based on records of 357 patients, 2005.

*Naila study*, Germany: Eger, H. et al., 'The Influence of Being Physically Near to a Cell Phone Transmission Mast on the Incidence of Cancer', *Umwelt-Medizin-Gesellschaft*, 17.4, 2004.

*Netanya study*, Israel: Wolf, D. & Wolf, D., 'Increased Incidence of Cancer near a Cell-Phone Transmitter Station', *International Journal of Cancer Prevention*, 1(2), April 2004.

**Some other studies:**

*La Nòra, Mercia*, Spain: Navarro, E. A., et al., 'The microwave syndrome: a preliminary study in Spain', *Electromagnetic Biology & Medicine*, 22 (2 & 3),

2003, 161-169; Oberfeld, G., et al., 'The microwave syndrome – Further Aspects of a Spanish Study', *International Conference Proceedings*, Greece, 2004.

*French study*: Santini, 'Study of the health of people living in the vicinity of mobile phone base stations,' *Pathologie Biologie* (Paris), 50 (2002), 369-373.

*Skrunda study*, Latvia: Kolodynski, A. & Kolodynska, V., 'Motor and psychological functions of school children living in the area of the Skrunda Radio Location Station in Latvia,' *The Science of the Total Environment*, 180, 88-93, Elsevier, 1996.



Haringey Council

Agenda item:

**11****OVERVIEW AND SCRUTINY COMMITTEE****DATE:****02 JULY 2007**Report Title: **Overview and Scrutiny - Work Programme 2007/08**

Report of: Chair Of Overview and Scrutiny Committee

Wards(s) affected: **ALL****1. Purpose**

1.1 To determine what issues the Overview and Scrutiny Committee would like reported to it during the Municipal Year.

1.2 To initially agree seven topics from the list at Appendix E, for which the Committee wishes to commission in-depth "task and finish" scrutiny review panels, plus scrutiny of the budget..

**2. Recommendations**

2.1 That the Committee:

- i. identifies the reports it wants submitted to it during the 2007/8 Municipal Year;
- ii. identifies and prioritises those topics to be subject to detailed review, with the aim of setting up task and finish review panels to investigate the eight priority topics (including budget scrutiny), with the remainder forming a rolling programme of future reviews;
- iii. Indicates those topics that have been suggested that it considers unsuitable for a in-depth scrutiny review and should therefore be taken off the rolling programme list.

2.2 That the Scrutiny Manager be instructed

- i. to circulate a draft Committee detailed work programme for 2007/8 incorporating the reports identified in 2.1.i. above to all members of the Committee prior to finalising it in consultation with the Chair.

<p>ii. to submit to future meetings of the Committee, scoping reports on carrying out detailed investigations into the topics selected.</p> <p>iii. to report to future meetings on the feasibility of undertaking detailed reviews into the other topics on the Committee’s rolling programme.</p>
<p><b>Report Authorised by:</b> Councillor Gideon Bull - Chair</p>
<p><b>3. Executive Summary</b></p> <p>3.1 This report sets out the reports which could be submitted to Committee over the next year and suggest a number of topics which could be subjected to more detailed review.</p>
<p><b>4. Reasons for any change in policy or for new policy development (if applicable)</b></p> <p>4.1 N/A</p>
<p><b>5. Local Government (Access to Information) Act 1985</b></p> <p>5.1 Previous reports and decisions</p>
<p><b>6. Finance, Legal and Equalities Comments</b></p> <p>6.1 N/A to the report at this stage</p> <p>.</p>

**7.0 BACKGROUND**

7.1 Statute provides that the Overview and Scrutiny Committee has the power to:

- review or scrutinise Executive and Council decisions in connection with any council service,
- make reports or recommendations with respect to any executive of council functions, and
- report or make recommendations on matters which affect the authority’s area or its inhabitants and in particular to scrutinise health issues.
- Following a “Call-In” review decisions made but not yet implemented.

7.2 The Committee’s powers to scrutinise are very wide and it is for Members to decide what items they want on their work programme and how they intend to carry out scrutiny exercises through the year. It is, therefore, essential that each year the Committee identifies:

- the issues it wants to be reported to it; and
- the topics for which it will commission scrutiny review panels to carry out more detailed reviews.

## **8.0 REPORTS WHICH COULD BE SUBMITTED TO THE COMMITTEE**

### **Reports on Performance**

8.1 Scrutiny Members have a key role in helping to improve the performance of the Authority and Health bodies. One of the ways they may do this is by considering performance indicator, audit and inspection reports. The role is not that of formal monitoring, which in Haringey is a Cabinet function, but of receiving sufficient information to gain an overview of how the Council or Health body is performing and which may help to identify areas where scrutiny may wish to become involved. Attached as **Appendix A** is a list of performance management reports which the Committee wish to receive.

### **Reports on Services and Strategic Developments**

8.2 One of the aims of the Committee's work programme is to provide Members with information about Council and Health services. **Appendix B** identifies service and strategic issues on which the Committee might find it helpful to ask for reports. This list is indicative only and the Committee may wish to ask for reports on other issues. Besides improving Member's knowledge of the way the Council operates, such reports will enable them to identify areas which might be subject to detailed reviews in the future. In order to ensure that Officers are not swamped with work it is proposed that the Committee receive up to 10 such reports a year, with no more than one from any service area (not Directorate).

### **Short Commissioned Reports**

8.3 **Appendix C** is a list of scrutiny topics that have been suggested in the past and which could be the subject of one-off feasibility reports to the Committee. Such reports will be produced by scrutiny support staff with the assistance and support of senior staff from services or Health body. They will enable the Committee to decide whether it wishes to take no further action, make recommendations to the Cabinet, or to commission a more detailed scrutiny review. It is suggested that seven topics be selected.

### **Follow – up Reports on Past Scrutiny Reviews**

8.4 It is essential that the Committee regularly follow up progress in implementing agreed recommendations from previous scrutiny reviews and whether the intended outcomes were achieved. This is a key function for determining the "added value" of scrutiny involvement. **Appendix D** is a list of previous scrutiny reviews where such an update is relevant in the municipal year.

### **Urgent Reports**

8.5 Occasionally events occur which necessitate an urgent report to Overview and Scrutiny Committee. Whilst clearly such reports can not be planned the need to allocate sufficient time for consideration of unforeseen events needs to be allowed for in the committees work programme.

## 9.0 **NUMBER OF ITEMS SUBMITTED TO EACH COMMITTEE MEETING**

9.1 Overview and Scrutiny members have raised concerns over the length of the agenda for some of its meetings. This has been by necessity rather than design, particularly in relation to Health issues where timescales have been imposed on local health bodies and the period for scrutiny involvement has been limited.

9.2 It is proposed that when possible no more than six reports should be considered at each meeting. A typical scrutiny agenda may therefore consist of:

- Executive Question Session (two Executive Members attending).
- performance reports.
- issue for information.
- reports on possible topic for detailed review.
- a report following up one or more past reviews or a final in-depth report from a commissioned task and finish scrutiny review panel.

## **The Committee's Annual Work Programme**

9.4 If the Committee agree the above meeting framework and identifies which reports it wishes to receive during the year, a detailed work programme can be drafted. This can then be circulated to Members for comment prior to being agreed, in consultation with the Chair. However, if there are any major disagreements or if any Committee member requests it, the detailed programme will be reported to the next meeting of the committee for approval.

## **Call-In**

9.5 The current Chair has decided that these will be considered at additional meetings wherever possible.

## 10.0 **TOPICS FOR DETAILED SCRUTINY**

10.1 In addition to the more regular work of the Committee, it is able to commission a number of task and finish scrutiny review panels, to look at chosen topics in-depth.

10.2 Scrutiny review panels require a high level of commitment from the Members who serve on them. It is proposed that the size of scrutiny panels be flexible and that they consist of between 4 and 7 Members drawn from each of the political parties. Each scrutiny panel will continue to be Chaired by a member of the Overview and Scrutiny Committee and the rights and position of statutory co-optees will not be affected.



## **Rolling Programme**

10.2 One of Scrutiny's long term aims is to develop and introduce a rolling programme of topics for in-depth scrutiny review. Not only will this allow the Committee to plan its future work programme but it will result in greater flexibility. Reviews can then be commissioned as resources allow. There is also no reason why task and finish reviews cannot run into the next municipal year albeit that membership might change in some circumstances. This would alleviate the bunching of scrutiny panel reports and allow a more balanced flow of scrutiny reports to the Executive.

## **Scoping/Feasibility Reports**

10.3 Members should not be asked to take decisions about the way they wish to carry out a review, until they receive a report for each topic, prepared either by the service involved, or by scrutiny officers. It is accepted that the process of drawing up a feasibility report will commit resources, but the additional information available will help Members focus reviews and to terminate them at an early stage if there is unlikely to be a satisfactory outcome. It is also essential that senior officers from the services concerned are involved in the preparation of the feasibility reports to ensure that strategic issues are properly dealt with.

10.4 Whilst health issues will invariably be different there is no reason why the above approach cannot be adopted when practical.

## **Criteria for determining the value of a Review**

10.5 Two years ago the Overview and Scrutiny Manager drafted criteria for determining the likely value for scrutiny reviews and used it to give a priority rating to each suggested topic. It was hoped that this would help Committee members to identify worthwhile reviews which accorded with the Council's priorities. This was not entirely beneficial as there were set criteria by which projects were evaluated and these were not weighted in any way. The marking was also in some incidences, by necessity, subjective.

10.6 A further complication was that some Non Cabinet Members, who were not on the Overview and Scrutiny Committee, saw the nomination and marking system as officers determining the scrutiny programme. It is crucial to the effective working of scrutiny, that all Members are aware that this Committee determines the scrutiny work programme. For this reason it is suggested that members of the Committee, rather than relying on an officer evaluation, prioritise suggestions for in-depth review themselves by applying the criteria set out below :

1. Does the proposal relate to something that the Council has given priority to in its Community Strategy?
2. Has the topic been identified in self assessment report or by any other external or internal audit or inspection improvement plan?

3. Does the issue have a demonstrably high public profile? (Identified through complaints, ward casework, local media etc.)
4. Is it likely that the scrutiny review would achieve tangible outcomes, increase cost effectiveness or 'add value' in some other way?
5. Would the likely outcomes of the scrutiny review have an impact on a substantial number of local people?
6. Would the review duplicate work recently completed, currently in progress, or planned to take place in another review process in the near future?
7. Would the scrutiny review be completed within a reasonable timescale?

### **Length of Review**

10.7 In the past Officers sought, when preparing the feasibility report to identify those reviews which could be completed in less than four meeting and those which would take longer. Limiting the length of a review in this way did, however, on some occasions, inhibit the Panel from following up unexpected or detailed information which arose during the course of the investigation. It is suggested that, in future, decisions about the length of time of a review should be left to the review panel.

### **Topics for more Detailed Review**

10.8 Attached as **Appendix E** is a list of review topics together with an indication of how each one arose and officer comments. This list resulted from a consultation programme involving all members and senior officers, our partners and the public. It also includes suggestions made in previous years, but never undertaken. The topics suggested are wide and varied and cover work undertaken not just by the council but also by our partners. It is suggested that for each topic the Committee considers the practicability of undertaking a detailed review and the advantages which might result from considering the matter in greater depth. (see paragraph 10.6). The Committee may also wish to ask the Executive if they can assist in the development of Council policy by looking at; issues such as the use of Local Area Agreements to deliver better outcomes for local people. This would also be in accordance with the Government's current views.

10.9 Included in appendix E are a number of more specific reviews some of which have resulted from previous investigations. In some cases these focus on value for money and in other instances on a specific area of work.

10.10 One topic the Committee scrutinises each year is the budget proposals and Members are considering how they intend to do this.

10.11 It is suggested that the Committee identify and prioritise those topics which it thinks could be the subject of a detailed review. In order not to overburden any service it is suggested that no Directorate should be asked to undertake more than two detailed reviews at the same time. Officers should then be instructed to submit feasibility/scoping reports to the Committee on the topics identified as having the greatest priority so that members may

initially commission 6 task and finish scrutiny reviews, in addition to budget scrutiny and determine which of its members should chair each review. It is suggested that the committee

10.12 To assist in this process of selecting in-depth topics all Directors will be invited to attend a meeting, or to ensure that they are represented by a senior officer, to advise members on potential reviews, their significance to departmental service objectives and the potential value of scrutiny review.

#### 11.0 **JOINT OVERVIEW AND SCRUTINY COMMITTEE**

11.1 The Overview and Scrutiny Committee decided to establish a Joint Scrutiny Committee together with Barnet, Enfield and Hertfordshire Councils in order to respond to proposals to re-organise Acute Hospital Services over the area. Consultation on the proposals has been delayed, but is expected to formally commence in Summer 2007.

## **Performance Management Reports**

The Committee would like reports, at the relevant time, on the following:

- The Council Performance Reports - 6 monthly
- The Council Plan, followed by update – 6 monthly
- The Children’s Service’s annual performance self-assessment
- School Places Planning - Annual Report
- Exam results – Annual Report
- Local Area Agreement Stretch Targets – 6 monthly
- Annual Adult Services Performance Self Assessment Report
- CPA Updates – short reports
- Annual Health Check – NHS Performance Ratings
- Adult Services Budget Monitoring - Update

## Appendix B

## Reports Which Provide Information about Policies and Services

For instance:

TOPIC	INITIAL SELECTION
Youth Justice Plan	
Children and Young People Plan	
Haringey's Strategy for Young people	
Haringey's Strategic Partnership	
Family Support Strategy	
Children's Centres	Priority
The Action being taken to implement a Common Assessment Framework (Children's Services)	
Local Area Agreement 2007 -2100	Priority
Review of Carers Strategy	More information requested
Domestic Violence Strategy	
Safer Communities Strategy	Priority
Crime and disorder Information Sharing Protocol	
Sexual Health Strategy	Priority
Employment and Skills Strategy	
Haringey Housing Strategy	
Homelessness Strategy	
Tenants Participation Compact	
Neighbourhood Renewal strategy	Priority
Strategic framework for Improving Adults' well-being	
Sports and Physical Activity Strategy	
The Cultural Strategy	
Recycling Strategy	Priority
Partnership working –an outline of who the Council's partners are and what they do	Priority
The Council's risk management strategy.	
Equalities Scheme	
Customer Charter	
Consultation Strategy	Priority
Mental health Action Plan	Priority
Life Expectancy Plan	
Supporting People Strategy	
Sustainable Community Strategy	Priority
Smoking Cessation Strategy	
Haringey Health report	Commissioned for 2 July 07 meeting
Haringey Primary Care Strategy	Commissioned for 2 July 07 meeting
Haringey Budget Strategy	Commissioned for 30 July 07 meeting

Appendix C

SUGGESTED SCRUTINY TOPICS WHICH COULD INITIALLY BE THE SUBJECT OF ONE OF REPORTS TO THE COMMITTEE

Topic	Initial Selection
<b>CHILDREN AND YOUNG PEOPLE</b>	
Driving up educational achievement of children looked after by the Council	priority
Provision of play facilities for children under school age	
Support to pupils with drug and/or alcohol problems	priority
Effective co-ordination of services for young people aged 16/19	
Fostering and Adoption of looked after children in Haringey	
Child Protection	Priority
Vulnerable Adults	Priority
<b>URBAN ENVIRONMENT</b>	
Out of hours enforcement & late night economy (licensing)	
Essential User Permits and permits for specific roads	Priority
Environmental Health – review strategy	
Conservation of our local heritage – good design	Priority
Performance of Housing Associations & Accredited Landlords	Priority
Homes for Haringey Business Plan	Priority
Performance of Homes for Haringey	Priority
Joint working of ASBAT	Priority
Paving Front Gardens/cross overs	
<b>ACE PEOPLE &amp; ORG &amp; DEVELOPMENT</b>	
HR Strategy, - effectiveness of new strategy	

<b>ACE PPP&amp;C</b>	
Funding for Community Organisations	
Haringey Compact	Priority
Town Twinning	
Haringey Strategic Partnership	Priority
<b>ADULTS CULTURE &amp; COMMUNITY &amp; SERVICES</b>	
Direct Payments for Care Packages	Priority
Libraries	Priority
<b>HEALTH SERVICES</b>	
Access to St Anne's Hospital Site	Priority

**The Committee wish to receive the following  
Follow-up Reports on Past Reviews in 2007/08**

**Allotments**

**Customer Services**

**Estate Parking**

**Intermediate Care**

**Mobile Phone Masts**

**Neighbourhood Wardens**

**Repairs to highways and Footpaths**

**Street Cleanliness**

**Teenage Pregnancy**

**Youth Re-Offending**

**Support To Small Businesses**



## OVERVIEW AND SCRUTINY

Appendix E

### POTENTIAL REVIEW TOPICS 2007/08

<b>Topic</b>	<b>Suggestion originated from</b>
<b><u>Children and Young People</u></b>	
Young persons sexual health	Councillor
<b>PFI Contracts with Secondary schools</b>	<b>Councillor</b>
<b>Building Schools for the Future</b>	<b>Executive Advisory Board</b>
<b>Financial controls and project management arrangements for our major capital projects i.e. BSF (£177m) and Children's Centres phase 2 (c. £5m).</b>	<b>Councillor</b>
Continuity of service provision as child changes schools	Scrutiny review into extended services provided at schools
Consistent charges and concessions for extended services provided by schools	Scrutiny review into extended services provided at schools
Child Protection	Member of the public
Vulnerable Adults	Councillor
Child Adolescent MH Service	Executive Advisory Board
Child and Young People's legal costs	Executive Advisory Board
<b>Youth Provision</b>	<b>Councillor</b>
Natural parents fundamental role to their children up to 5 years	Councillor
<b>Wi Fi Networks in schools</b>	<b>Councillor</b>
<b><u>RESOURCES</u></b>	
<b>Value for money in areas of past investment – to be identified suggestion from Finance.</b>	<b>Suggested in past</b>
<b>Budget consultation process and budget scrutiny</b>	<b>Carried out every year</b>
Themed value for money reviews – areas to be	Suggested in

identified by Finance Department	past
<b>Base Budgets Residential Care</b>	<b>Councillor</b>
Commercial Property Portfolio (shops)	Councillor
<b>Procurement Process - Food purchase</b>	<b>Councillors</b>
<b>Parking Income Collection</b>	<b>Councillor</b>
Parking Enforcement	Councillor
Quarterly Revenue Budget Monitoring	Councillor
<b><u>ENVIRONMENT</u></b>	
<b>Sustainability – promotion of sustainable living to the public</b>	<b>Suggested in past</b>
Air Quality	Councillor
<b>Value for money of arrangements for collecting fly tipped rubbish</b>	<b>Arose from Fly tipping scrutiny review</b>
Utility works (planning and co-ordination)	Executive Advisory Board
<b>Waste Collection</b>	<b>Councillors &amp; Executive Advisory Board</b>
Transport strategy	Councillor
Pavement Crossovers and paved gardens	Councillor and public
Regeneration	Councillor
Essential User Permits and permits for specific roads	Councillor
The energy efficiency of council-owned buildings, including schools and housing.	Suggested in past by a Councillor
Grants and interest free/low interest loans for homeowners to make their properties more environmentally-friendly, e.g. to install solar panels, insulation and water butts	Councillor suggested in past
Promotion of car sharing and car pools.	Councillor Suggested in past
Habitat conservation areas of our parks.	Councillor Suggested in past
Planning Process	Councillor
Planning Enforcement	Councillor s Suggested in past
Registered Social Landlords Part 2	Executive Advisory Board
Joint working of ASBAT	Councillor

Out of Hours Agenda	Councillor
Social Clubs	Councillor
HMO Licensing	Councillors
<b>CHIEF EXECUTIVES</b>	
Haringey Compact	Voluntary Sector
Effectiveness of partnerships	Suggested in past
Drug and alcohol crime	Suggested in past
Working with other agencies to combat crime	Suggested in past
<b>Neighbourhood Management and Services</b>	<b>Councillor</b>
Haringey Strategic Partnership	Councillor
Community Consultation	Councillor
Local Area Agreement Stretch Targets	Councillor
Staff sickness and related costs of cover	Councillor
Haringey's Communications	Councillor
Customer Services	Councillor
<b>ADULT CULTURE &amp; COMMUNITY SERVICES</b>	
What is being done to encourage smoking cessation	Health body Suggested in past
Libraries	Councillor
Support for carers	Councillor
Life Long Learning	Councillor
Blue badge scheme	Councillor
<b>Services for older people – partnership working</b>	<b>Councillor</b>
Concerts in parks policy review	Councillor
<b>HEALTH SERVICES</b>	
What should an “information prescription” look like	Health Service
Primary care	Health Service
Licensing, affects of new legislation on health	Health Service
<b>Access to General Practitioners</b>	<b>Councillors &amp; Health Service</b>
Priority Housing for people with Mental Health illnesses	Councillors & Health Service
Prevention and early intervention	Health Service
<b>Access to dentists</b>	<b>Councillor and the Executive Advisory Board</b>
Addressing Health Inequalities	Health Service
<b>High Intensity Users</b>	<b>Health Service</b>

Access to St Anne's Hospital Site	Health Service
Young persons mental Health	Health Conference
Acute mental health care	Health service Health conference
Health education	Health conference
Dementia	Health conference
Control of hospital visitors	Health conference
Single sex wards	Health conference
Hospital born infections	Health conference
Eating disorders	Health conference
Obesity	Health Service
Patient transport	Health conference
<b>Others</b>	
Job Centre Plus	Executive Advisory Board
CONEL	Executive Advisory Board

## Reviews started and rolling over municipal year

I.T. Projects	Chair – Gideon Bull
School Exclusions	Chair – Pat Egan
The Haven Day centre	Chair - Gideon Bull