



**Brighton & Hove  
City Council**

**Publicly Accessible Toilets  
Scrutiny Panel Report  
Volume 2 – minutes and evidence**

**Report of the Overview and Scrutiny Committee**

**Date: July 2013**

**Panel Members:**

**Councillor Amy Kennedy (Chair)  
Councillor Alan Robins  
Councillor Denise Cobb  
John Eyles (Co-optee, Older Peoples Council)**



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# 1. Publicly Accessible Toilets Scrutiny Panel

## Schedule of meetings

Date	Purpose
	Private scoping meeting
25.01.13	Public meeting
11.02.13	Public meeting
26.02.13	Public meeting

## 2. Minutes of the public evidence gathering meeting -25.01.13

### BRIGHTON & HOVE CITY COUNCIL

#### SCRUTINY PANEL ON PUBLICLY ACCESSIBLE TOILETS

3.00pm 25 JANUARY 2013

#### BANQUETING ROOM, HOVE TOWN HALL

#### MINUTES

**Present:** Councillors Kennedy, Cobb, and Robins, John Eyles (Co-optee, OPC)

**Also in attendance:** Jenny Cooke, Jan Jonker, Adam Bates, Mike Holford, Peter Castleton, Tom Hook and Karen Amsden

#### PART ONE

##### 1. CHAIR'S INTRODUCTION

The Chair thanked everyone for coming to the first public meeting of this scrutiny panel and congratulated officers on yet again being assessed as the top local authority in the National Loo of the Year award for the third year running.

This panel has clearly not been established to look at the quality of the service provided but rather how, at a time of dwindling resources, future provision of publicly accessible toilets in the city can be secured.

The focus of the panel would be to look at innovative ways to maintain, or encourage the expansion of publicly accessible toilets in the city. This would include looking at the 'Use our Loos' scheme where businesses open up their toilets: alongside the existing, and up and coming, funding opportunities for the service such as the Community Infrastructure Levy and the City Plan.

The underlying principle for this panel was to look at ways to fund and enable good public access for all, to toilets in Brighton & Hove. It would assess the importance of this service in meeting the needs of a city which:

- Is a tourist destination
- Has a thriving night time economy
- Houses significant numbers of people who particularly need this service due to their health, age or caring responsibilities

The panel was holding three public meetings, which in turn will address each of the following themes:

- Mapping the existing service and identifying potential threats and opportunities
  - Understanding the specific needs of groups who use this service
  - Learning from good practice and preparing for the future
-

The panel would use the evidence to:

- Describe the strategic value of this service
- Map the general, and specific demand, for publicly accessible toilets
- Identify innovative funding solutions and best practice to meet service needs
- Suggest actions for the council, as well as partners and stakeholders, to help them secure a future for this service

## 2. PROCEDURAL BUSINESS

- Declarations of substitutes – There were none but both Cllrs Robins and Cobb had sent their apologies for being late for this meeting, due to unavoidable commitments
- Declarations of party whip – none
- Declarations of interest – none
- Exclusion of press & public – none

## 3. WITNESSES

### A. City Clean

**Jenny Cooke (JC), Contracts & Projects Manager** provided a brief overview of the service. There were 83 publicly accessible toilets in the city, comprising of:

- 44 traditional public toilets
- 19 toilets in museums, libraries and leisure centres
- 20 toilets which participate in our Use our Loos scheme
- 2 of the above toilets were newly publicly accessible - Booth Museum and Hove Rugby Club

The council had a contract with Wetton Cleaning Services for cleaning and maintenance which ran until 2017. While the majority of the toilets were unattended, some units were attended for all, or part, of their opening hours which reduced vandalism and anti-social behaviour as well as ensuring a good standard of cleanliness and prompt repairs. A Changing Places toilet had been built in The Colonnade toilets, Madeira Drive, funded by Wettons and a second was planned for the new development at the Level. The council had been rated first in the country in the National Toilet Awards.

In general businesses had been reluctant to engage in the Use Our Loo scheme which had run since 2000, primarily due to their location in smaller businesses. When new public toilets were installed they were generally:

- Accessible
- Gender neutral
- Single use cubicles which are visible, with no waiting room
- Family friendly

The service was seeking to increase provision by encouraging businesses to take responsibility for the toilet provision in parks when setting up a café, for example Aldington Rec. This was through agreeing new leases where this was a requirement, wherever possible or appropriate. They were hoping to work with colleagues on the City Plan, to encourage (or require) large developments to open up their toilets to all rather than just those using the attraction. Large tourist developments encourage more people to the area and where they are already providing

customer toilets the requirement to make them available to the general public, without pay for admission to the attraction, should have minimal impact.

**Q: The 2008 document by the Department for Communities and Local Government (CLG) recommended that local authorities develop a strategy for public toilets, would you welcome such a strategy here?**

**Jan Jonker (JJ), Head of Strategy and Projects** explained that he was cautious about the value of a strategy - due to the amount of time and resources it would absorb at a time when the council had to save £20m. It would be a better use of time to produce an action plan for the service. The priority for the service was to maintain the provision and expand where possible, such as:

- investigating the feasibility of charging for toilets
- extending provision through leases in parks
- looking for provision in new tourist developments

This action plan would be consulted upon.

*The panel felt that it would be useful to look at the value of an action plan and/or a strategy for the service as a potential recommendation in their report.*

**Q: Are there any gaps in the service provision e.g. opening hours?**

JJ told the panel that one could always do more by increasing the number of toilets, opening for more hours and upping the number of attended toilets. They got useful feedback from users, for example JC said that the service was constantly reviewing opening hours because there were a lot of comments about early closing hours in parks. This had to be balanced with the issue of safety, so the opening hours were staggered and park toilets were open longer in the spring and summer daylight.

**Q: How can we attract additional investment to the service e.g. joint arrangements with other providers?**

JC informed the panel that a corporate sponsorship contract was being let for billboards and then it may be possible to attract funding for smaller posters e.g. which could be placed in publicly accessible toilets to raise money.

*Action: JJ to find out further information from Jake Barlow and feed back to the panel.*

**Q: If there was greater funding for the service, would it be better to open our facilities for longer hours or increase the number of toilets?**

The panel heard from JC that they had just agreed to open some sites earlier and now the majority of toilets are open by 8am and shut at 10pm (summer) and 8pm (winter) (highway and some seafront sites) . If these facilities were open longer, they could attract vandalism and other anti-social behaviour (ASB). There used to be 24 hour toilets which were shut due to vandalism and concerns for the safety of users and staff having to visit to clean.

An example of a new site is the toilets at Blakers Park which cost approximately £125,000, including the sewage connections and a tailor made roof: but each site had different costs. While it was unlikely that sponsorship could fund new provision, budgets were so tight that the money could be used to maintain existing stock. Then other ways could be sought to fund new provision.

*The panel recognised the vulnerability of the service because it was not statutory, therefore they had a role in establishing how important this service is.*

**Q: How does the night time economy impact on your service?**

According to JC their service was shut then and so the night time economy had no definitive impact upon it. PC told the panel that the night time economy started at 10pm and the 24 hour provision of toilets may not mitigate the impact of a drunk 24 year old.

*The panel could see that opening public toilets at night may not be a good idea. For the Use our Loo scheme, pubs rather than shops might be a better place to seek public access to toilets at night.*

**Q: What is the potential for combining aspects of the Use our Loo scheme and the Can't Wait Card?**

JC explained that the Can't Wait Card could be purchased from a range of organisations. It was used by holders to show to businesses and other venues to explain that they had a medical condition and needed to use the toilet. This provided a discrete way of asking to use the provision. City Clean were currently exploring whether combining this with the Use our Loo scheme, would be more appealing to businesses rather than expecting them to grant public access to all. They had found that businesses did not like displaying details of the Use our Loo scheme, so a list could be produced of participating toilets and inform card holders where these facilities were located. There could still be difficulties regarding both the location of toilets in these businesses and insurance issues, but reshaping this scheme could increase its popularity with businesses.

*The panel were keen to find out more about this potential change to the Use our Loos scheme and so Jo Jones from City Clean has been invited to speak to them on 11<sup>th</sup> February. The production of a booklet and publicity may make businesses more willing to participate in the scheme.*

**Q: Much of the infrastructure is Victorian, what level of improvements need to be made to public toilets? What would be the refurbishment costs?**

JC told the panel that they did not have a ball park figure. While ten sites had been decorated internally at no cost each year as part of the contract, the old buildings would cost a major amount to refurbish.

**B. Tourism and Leisure**

**Adam Bates (AB), Head of Tourism and Leisure** told the panel that there were around 8m visitors to the city each year. They contribute £722m to the local economy, and 14% to local employment, but were not always considered when planning services. This was why public toilets are critical to the local economy. The Tourism Strategy included sustainable patterns of business. The city was a year round destination built on balancing the needs of these groups:

- Business and conferences
- Leisure
- Events

There was not a desire always to see growth, for example in August.

The CLG Select Committee in 2007/8 reported that tourists and visitors ranked toilets high in their lists of needs when visiting British resorts and destinations. Because most journeys begin and end with visiting toilets, it can have a high impact on tourists' assessments of a destination.

According to the last On Street Visitor Survey conducted in 2009, visitor satisfaction was on a scale of 1-10:

- Availability of public loos – 6.54
- Cleanliness of public loos – 6.62
- Overall feeling of welcome – 8.00

The views of Visitor Information Staff about publicly accessible toilets were that:

- Overall provision was considered good
- Very few complaints received
- Hope that the current provision could be maintained
- Benefits to all, but particularly older people, those with medical conditions and families

The Seafront Service reported that:

- There were very high variations in usage, at weekends can have 200,000 users
- Many seafront businesses do not have own toilets
- 460 beach huts and 105 chalets with no toilets
- So this area was very dependent upon public toilet provision
- Seasonal opening hours of many toilets, which can make it difficult to respond to variations e.g. high attendance on New Years Day.
- Wettons provision viewed very positively by AB's staff
- It was a challenge how the seafront may change and develop in the future and one of the areas looking to improve was Madeira Drive. If these opportunities were realised, this could put additional pressures/demands on the toilet facilities
- Close work with Rottingdean Parish Council on building toilet facilities, where there had been only seasonal/temporary facilities before

**Q: Given how dependent the city is on tourism, what do you think tourist will feel about being charged for using facilities in times of peak demand?**

AB told the panel that the majority of tourists would choose not to pay, but he believed that the majority would accept charges if the facilities we provided were of an acceptable standard. The important factors to tourists would be:

- Availability
- Cleanliness
- Good maintenance

However he was not aware of how financially viable it was to charge.

According to JC there used to be a 20p charge in summer for the Lower Promenade toilets in West Street. However it did not cover staff costs, as the majority would choose to go to the next toilets which were signposted at the facility. When fully automatic toilets were introduced in 1984, there was a 20p charge to use them. People did not like these facilities

**Q: When it comes to providing information for visitors about toilets there is a good map online, but are we planning to introduce anything else such as Apps?**

AB told the panel that it would not be worthwhile to produce a toilet App for the city because there are a number of good national Apps and it was important to ensure that their information was up to date. The toilet signage in the city was good and needed to maintain this level of service.

JC said that the British Toilet Association was seeking funding to produce a national on line map of toilets. Australia had a map for every town. She felt that directional signage on the street could be improved in certain areas.

**Q: Could more of our sporting venues and leisure facilities open their toilets to the public?**

AB told the panel that the majority of these sites were publicly accessible. An exception was King Alfred where you needed to go through a turnstile. According to JC there had been a full pull-out on publicly accessible toilets in the Argus a few years ago.

*The panel felt it could be useful to give greater publicity to the availability of publicly accessible toilets in leisure centres. Members of the public may be more comfortable using these premises than toilets located in businesses.*

**Q: Temporary toilets are used for big events such as Pride, do you think there is any scope for using them in peak times in locations such as West Street and the seafront?**

According to AB temporary toilets were usually arranged by the organiser of the event. Pride was the only occasion where they were directly provided by the council. In West Street this would be a year round issue at least three nights a week, which needed a permanent situation.

PC said that the night time economy attracted a different kind of visitor, who when they left a pub with a full bladder may urinate wherever they happened to be including in shop doorways leading to a bad smell and hygiene problem the next day. There were pop- up toilets to address this issue in Leicester Square, but these type were prohibitively expensive. In Newquay there was a few portaloos which were dropped off the back of a lorry and placed in popular areas and then collected again after the weekend.

**Q: Is the Prince Regent publicly accessible? Does this accessibility reduce security as have heard of homeless people using the showers in this location?**

AB confirmed that the toilets were publicly accessible and currently being refurbished. The dilemma was that opening up facilities did reduce the security. JJ agreed that the issues also related to the Use our Loos scheme.

The panel thanked AB for giving them such a good sense of how important publicly accessible toilet provision is to the visitor economy.

## **C. Planning**

**Mike Holford (MH)**, Strategic Planning and Monitoring Manager began by telling the panel that he had been informed by Network Rail that the charge for toilets at railway stations was to discourage ASB, rather than cover costs. PC added that the toilets at Victoria were attended but still people jumped over the barriers. However if there was money being collected on unattended premises this could attract thefts.

The Planning service was approaching this issue from 2 angles:

1. developer contributions

2. including publicly accessible toilets, within new developments that attracted a lot of people

The main aim of existing developer contributions (or S.106) was to mitigate the impact of a new development, but it should not be used to mitigate existing deficiencies. S.106 process became a tariff on new developments. In the time of prosperity, developers may not have been so concerned what this money was spent on. However the economic downturn and reduced funds have led to the government tidying up the planning process.

The Community Infrastructure Levy (CIL) was proposed by the Labour government and carried on by the Coalition. CIL is based on an amount in £s per square metre of additional floor space and is levied on all eligible development to enable growth. S.106 was negotiated for each development. The CIL was a form of development tax; which will be transparent with developers, council and the public all knowing what amount will be raised. The first 8-9 local authorities that had adopted CIL may have found it relatively easy to introduce and he was aware that Bath and North East Somerset were investigating the use of CIL towards publicly accessible toilets.

It was possible that publicly accessible toilets could be required for very large developments. It would be very useful to have a statement of need for this service, for example, including the demands from tourists for public toilets (e.g. a 10 point plan) rather than making the request without any evidence.

It was important to lower expectations here about CIL because it would not be the panacea, as it would not raise as much money as some expected and it was more than likely that there would be more demands than CIL could meet. BHCC needed to decide what were its priorities for the funding it gained from CIL.

MH felt that a more positive approach could be to require the provision of publicly accessible toilets in new developments as a policy requirement. However, even if one could address the issue of provision of public toilets, then one needed to be able to afford the maintenance of that facility and keeping the service running. For example at Toads Valley, a development of that size could include publicly accessible toilets and that could be seen as an important component due to the shopping and tourism use. He believed that the second option would be more likely to secure publicly accessible toilet provision, than the use of CIL.

JC explained that the aim would be for large tourist developments to allow general access to the customer toilets they would be providing anyway. They would already have a budget in place for cleansing and maintenance.

**Q: Would this be a process of setting it as a condition for each building, rather than a blanket requirement to provide publicly accessible toilets?**

MH confirmed that it would need to be considered on an individual basis depending on the nature of the development.

**Q: With CIL, are you able to take the funds raised and use them to build the facilities elsewhere?**

With CIL the money raised could be spent anywhere in the City in accord with a list of requirements produced by the council. With S.106 there needed to be a link to the development, this usually means that the money is spent on or very close to the site, but does not have to be if there is a functional link between the site and what is provided. For example, money from a S.106 at Churchill Square could be spent on real time bus signs in Mile Oak as there was a bus service between the two points.

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## **Q: Would it be possible to know more about the City Plan**

At the moment the City Plan was not a detailed strategy but JC and Debra May (Developer Contributions Officer) were working together to provide a policy hook to negotiate planning in relation to tourism and retail development (for example the new mini pop-up supermarkets in residential areas).

*The panel felt that they would like to obtain more information about policy development in this area especially in relation to tourism and big retail organisations and conditions set for new developments. To find out more from Planning about CIL policy and development expectations.*

According to PC the alcohol licences for city centre express supermarkets were reluctantly agreed and one could argue that they should provide publicly accessible toilets, given that they are selling the alcohol that leads to night time fouling.

PC explained that during the daytime there were no specific hotspots relating to crime & disorder and ASB. He was not sure how speedily such incidents were reported by Wettons, but was assured by JC that such incidents were reported to the police instantly. This would include:

- Major vandalism
- Sexual activity
- Arson

Information was collected by Wettons on day-to-day vandalism, collated monthly and then discussed with the police and community safety.

PC told the panel that the majority of public place daytime ASB was made up firstly of alcohol and drugs misuse and the problem areas were in the city centre. Cottaging, men seeking sex with men, had been an issue from time to time at the toilets in Concorde 2. The key night time economy disorder issues began from about 10pm.

The standard of the toilets and its design had a big impact on how safe people feel when using facilities and the likelihood of offending taking place there. If the facility was damaged it was more likely to attract offenders. This issue could be addressed by minimising common areas and increasing the natural surveillance.

JC explained that, where appropriate, the number of visits to unattended sites were increased to deter vandals. The design was important including reducing the height of cubicle doors and not using reflective tiles, which gave people notice of others coming into the facility. The real hotspot where there had been an issue was the Open Market. This included drug use, to the extent of experiencing drainage problems because of the drug paraphernalia. The service had been working with the police on this. Public toilets there had been attended but they are now cleaned by a mobile cleaner, this was due to budget savings identified in February last year.

PC told the panel there had been a debate about introducing drug consumption rooms, places where people can 'use' safely. This debate was because some of our toilets are frequently used as injecting rooms, which could end up being conducted on the streets if it was not done in these toilets. One needed to think of the impact this could have on visitors and residents. He believed there would always be latent drug use in public toilets.

*The panel were interested in finding out more about this issue in relation to protecting residents and visitors, however it could only really acknowledge the issues being raised.*

JC explained that fully automatic toilets, and those with RADAR keys, had experienced very significant drug use. Sharps boxes had been installed in the automatic public toilets to increase the level of disposal, as well in Blakers Park and behind Upper Rock Gardens toilets. Approximately 2/3<sup>rd</sup> of sharps were disposed of safely in the automatic toilets. The sharps box in Blakers Park is not used.

PC felt that there was insufficient publicly accessible toilet provision to meet the needs of the night time economy, so welcomed the written statement from Tim Nichols, the Head of Regulatory Services. He confirmed that 70% of any Late Night Levy (LNL) would go to the police, however the police took a holistic approach to managing the night time economy. Operation Marble<sup>1</sup> related strongly to tone setting. Minor ASB such as discreet urination was seen as part of tone setting and dealt with robustly, so think there is an appetite for the police to deal with this issue. Officers will do something about this behaviour where it is found.

However problems arose where people were queuing or competing for services e.g. at kebab shops or taxi ranks and may be concerned about losing their place in the queue. In Paris there were 'pissoirs' which are very public men's urinals that do not lead to cottaging or other forms of ASB.

*The panel acknowledged that there were different kinds of facilities used in other locations and countries. For example Westminster had very high tech pop-up urinals, whereas Paris and Amsterdam have lower tech solutions. It would be interesting to know what residents would think of these kinds of facilities.*

*Action: JC agreed to provide different costs for differing forms of temporary provision. KA to include the written statements from city centre councillors regarding the night time economy and on street urination along with the minutes.*

**Q: Do you think that these 'temporary' facilities would be used and residents accept that they would be present for '24 hours' e.g. on a sunny day?**

PC felt a drunk 24 year old may not use these facilities of their own volition, but the police could direct them there. If a pissoir was well-designed it could become part of the street furniture. Such facilities send a clear message and provided more places to go.

JC had looked at pop-up urinals, ground level ones which opened up at night for greater flexibility but they were only for men and were not accessible.

PC reminded the panel that the Portaloos used by Newquay, incurred staffing costs for picking them up whereas pissoirs have lower maintenance costs.

*A member of the panel expressed concern about the shutting of toilets in Portslade and discussions about putting resources into the town centre.*

**Q: Like the CIL, one could make a cogent case for businesses to contribute to costs using the Late Night Levy (LNL). In addition could pubs and clubs when redesigning toilets make them accessible, as there are already bouncers to police them? Currently toilets were not usually placed near the opening of pubs and clubs, but this could be changed when redeveloping the premises. The Sainsbury's in St James Street had been prevented from having an alcoholic licence due to impact.**

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<sup>1</sup> **Operation Marble** sees Police & Police Community Support Officers (PCSOs) in high visibility jackets in city centre hotspots from 8 pm (from Council website <http://www.brighton-hove.gov.uk/index.cfm?request=c120719>)

DC explained to other panel members that most licenses stipulated 'not lingering' but the provision of toilets would encourage people to linger. PC said that toilets to be opened up would just be the ones already in the premises. So it could just be a general collective principle that businesses in the city centre, such as supermarkets, should open up their toilets if they are contributing to the problems of on-street urination.

*The panel agreed that it would be useful to explore the LNL further, as one of the options.*

**Q: Do charges for toilets cover costs? Would people pay if they were charged for all facilities across the city?**

JC informed the panel that they used to charge for toilets in summer for 20p for West Street, Lower Promenade which did not cover costs. They had discussed charging for a premise with Wettons, who felt it was not economically viable. According to JJ there would be significant costs in installing the charging infrastructure and then the facilities would need to be attended to make them accessible for all e.g. those with buggies.

**Q: It is good to hear that the police view public urination and defecation as a serious issue and that a partnership could be forged using the LNL. But could we do more to encourage businesses outside the LNL?**

PC told the panel that both the council and the police have found it very difficult to secure any resources or assistance from big pub, club chains and supermarket chains. It would seem to be a non-starter as these businesses did not appear to have any interest in re-investing in the local community. This did not mean one should not try it again.

*The panel agreed that it would be useful to consider if there were ways to secure the assistance of businesses, as residents were suffering from this problem. They wondered when does a temporary facility become permanent, e.g. round taxi ranks, if it is present every Thursday to Saturday?*

**Q: Could one put CCTV cameras in the communal areas of toilets to deter criminal behaviour?**

PC told the panel this would be possible but would run into issues re: RIPA authorisations so you could only do this in very serious cases of ASB. JC confirmed that they had tried this at a facility with a fake CCTV camera, which had been stolen.

**The panel now considered written evidence from Angela Dymott, Head of Property and Design and Tim Nichols, Head of Regulatory Services:**

**In response to Angela Dymott's statement:**

*The panel were aware that many of the toilets in council buildings were in secluded locations e.g. Hove Town and it was clear from AD's submission that security was a primary concern and therefore access was unlikely to be widened. They welcomed the positive news about Rottingdean Grange Library.*

**In response Tim Nichol's statement:**

*The panel appreciated his caution regarding the LNL as a new means of raising finance for this service. They appreciated the need to consult on this issue and then make recommendations. Given the evidence the panel had heard today they were interested in making recommendation(s) regarding the LNL.. They were concerned whether one could be open to the*

*DDA if provide facilities only for men. The panel agreed on the need to plan for the future and consider what services would be needed in 15-20 years*

*Action: KA to obtain a written statement or invite the police to the final meeting on the 26<sup>th</sup> February. KA to obtain cost information and details about different types of toilet provision e.g. Portaloos v curly toilets.*

#### **4. DATE OF NEXT MEETING**

The panel agreed that the second public meeting of the panel would take place on 11<sup>th</sup> February at 2.30pm in Committee Room 1 of Brighton Town Hall. The third meeting of the panel would take place at 10am on the 26<sup>th</sup> February at a venue to be confirmed.

#### **5. A.O.B**

There was no AOB.

The meeting concluded at 5pm.

Signed

Chair

Dated this

day of

### 3. Minutes of the public evidence gathering meeting - 11.02.13

#### BRIGHTON & HOVE CITY COUNCIL

#### SCRUTINY PANEL ON PUBLICLY ACCESSIBLE TOILETS

2.30pm 11 FEBRUARY 2013

COMMITTEE ROOM 1, BRIGHTON TOWN HALL

#### MINUTES

**Present:** : Cllrs Kennedy, Robin and Cobb and John Eyles (OPC)

**Also in:** Jan Jonker (BHCC), Jo Jones (BHCC), Jason Carlisle (Mencap), Ruby Kearns (Parent Carer's Council), Dr John Hastie (Brighton & Hove Federation of Disabled People), Andy Player (Crohn's and Colitis UK, Brighton & West Sussex Group), David Watkins (BHLink) and Karen Amsden (BHCC)

**Other Members present:**

#### PART ONE

#### 6. CHAIR'S INTRODUCTION

The Chair welcomed witnesses to the second public meeting of the panel, which was focussing on the needs of particular groups who use publicly accessible toilets in Brighton & Hove.

#### 7. PROCEDURAL BUSINESS

There were no declarations of interests and party whip.

#### 8. MINUTES OF THE PREVIOUS MEETING

The panel agreed the minutes of the meeting on 25<sup>th</sup> January 2013.

#### 9. WITNESSES

##### City clean

**Jan Jonker (JJ) and Jo Jones (J Jones)** explained to the panel that they were here to outline their progress on the Use our Loos scheme. J Jones explained that the scheme was set up in 2000 but there had been problems in getting businesses to join, then remain, in the scheme. Their concerns included:

- Anti-social behaviour (ASB)
  - Opening up their premises to 'all and sundry'
  - Costs incurred such as water metering, cleaning and supplies
  - Insurance implications
-

Examples of participating businesses include Churchill Square, M&S and BHS (who had recently left the scheme). There were difficulties in locations such as Kemp Town, which has smaller businesses that either don't have accessible toilets or would be reluctant to open them up to the public. Woodingdean and Western Road (where McDonalds and coffee shops did not want to know) were other areas where businesses did not want participate. Pubs tended to be more positive about the project, but a lot of potential users do not want to go into them to use the toilet.

City clean had tried to encourage businesses to join, but did not offer any financial incentives unlike some other local authorities. Through BHLINK, they had found about the Can't Wait Card and were developing a proposal to link this card to the Use our Loos scheme (see attached briefing paper). City clean would like to investigate whether more businesses would sign up to the scheme, if it would be primarily for holders of this card. That rather than open up their toilets to 'the world and their wife' it would just be to people who had specific needs. A key target would be to persuade GP surgeries to sign up to this scheme.

*The panel felt that having heard about the difficulties of encouraging businesses to participate in the scheme, that this proposal sounded like a 'tangible and sensible way forward'.*

**Q: Will businesses have heard about the 'Can't Wait Card?'**

J Jones told the panel that the intention was to approach businesses, such as GPs surgeries, and tell them about the scheme. If the organisation signed up they would be put on a list (not distributed publicly) which would be available for 'Can't Wait Card' holders. We would have this as a downloadable document on the website, which anyone could access, but that would be signposted for those with the additional need. City clean would contact these businesses every 6 months to check how it was working out in practice.

**Q: Could you have a scheme where businesses had to opt out of opening up their toilets to the public?**

Businesses, such as GPs surgeries need to know what scheme they are part of, or users could risk being turned away from the premises. To get such organisations to join this scheme would be a good thing for the city and we would be the first local authority to promote the Can't Wait Card.

J Jones explained that they were preparing a database for the project but hoped to launch the project with the support of the panel.

**David Watkins (DW)** suggested that GPs should not be approached until after 1<sup>st</sup> April when the new health laws came into power, formalising the commissioning arrangements.

JJ hoped that this proposed scheme would be reflected in the recommendation(s) of the panel and that they would approach Tom Scanlon in the first instance.

J Jones explained that a benefit of the Can't Wait Card was that it could be shown to people to explain why the holder needed to use the toilet. Businesses had been concerned about opening up their toilets to all because they were concerned about:

- Sexual activity
- Drug use
- ASB

~~The showing of a card could reassure the business that the person had a specific medical need to use the toilet and did not wish to damage the facility or behave inappropriately there. City~~

clean hoped existing participants in Use our Loos to move to this scheme and then it extend it to a wider group of organisations e.g. GPs surgeries. If GPs could be persuaded to join then this would represent almost 50 businesses opening up their facilities and if another 50 organisations joined too, then this would provide 100 extra facilities for people who were planning to spend the day out in the city.

*The panel felt it would be showing civic leadership and offered support to these proposals and would encourage the leadership of the council and the Clinical Commissioning Group leaders to work with local GPs to ensure that this happened. The scheme could give businesses confidence that opening up their facilities would not be a 'free for all'.*

A member of the panel commented in relation to their retail experience that the boss of an organisation would say:

- What's in it for me?
- That seems like a whole load of trouble: not worth my while
- I don't have the resources to check that my facilities are clean

**Q: How can you present this scheme to businesses in a way that would make them want to take part and allay their concerns about issues such as insurance and health & safety?**

J Jones explained that they would be asking businesses who already opened up their toilets for customers (or patients, in the case of GPs) would have these premises already insured, and designed, for public use. For example some businesses have toilets which are for the use of customers only, it just would be a question of putting a business like that who wanted to participate onto a list for Can't Wait Card holders, including post code information. This would also deal with businesses who do not want to display another sticker in their window. So the scheme would be aimed at businesses who already had customer toilets, opening them up to non-customers in need.

**Q: Would you negotiate with the NHS as a single body or contact individual surgeries about the scheme?**

JJ told the panel that he hoped that there would be a scrutiny panel recommendation on this proposed scheme and on that basis City clean would approach Tom Scanlon as the first point of contact.

## **Mencap**

**Jason Carlisle (JC)** explained that Michael Le Surf from Mencap was the national lead on the Changing Places campaign. He was pleased to see that Brighton & Hove already had one Changing Places toilet but it was not in a very accessible location. The campaign would like to see a Changing Places toilet in every large scale building, such as arts venues and shopping centres.

There were nearly 250,000 people in the country who cannot use standard accessible toilets, because access was needed for the person and their carer and the provision of an adjustable bench. This meant almost a quarter of a million people who would not be able to visit places like Brighton & Hove due to the lack of facilities, even though it was a transport hub and a hub for tourists. No-one should miss out on being able to visit Brighton & Hove, or if a resident not being able to travel round the city.

The campaign wanted to persuade Brighton & Hove to build more Changing Places toilets. A set size of building was not needed, but sufficient room for a person and up to two carers (if

needed) and room to clean; along with a height adjustable bench and hoist. Very specific equipment was needed and space standards.

**Q: Can one adapt existing toilets?**

JC explained that it was more effective to secure the provision of such toilets in new buildings, like supermarkets.

According to J Jones, the Colonnade had been chosen as it was one of the only sites that was big enough and one was being installed at the Level because it was included at the beginning of a development.

**Q: Do Changing Places need to be accessed using RADAR keys?**

JC told the panel, that there was no statutory guidance, so one can determine how the access is given to the facility.

**Q: How can one afford to build this type of facility?**

JC explained that this toilet needs to be in addition to general provision, rather than instead. There was no specific fund for this kind of toilet, but funding can be gained from grants. For example the toilet built at the Barbican was funded by the Lottery with Action for Children.

*The panel felt that there were sources of funding out there and in order to develop bids, it would be useful to know roughly how many Changing Places toilets were needed in the city.*

JC would find it hard to quantify, as he was not sure how many people with multiple disabilities lived in the city. However they think at least 2-4 were needed, for example at:

- Station
- Pier
- Churchill Square

JC agreed that he would provide information on other examples of successfully building Changing Places toilets, e.g. other local authorities and retail outlets.

*The panel agreed that when looking at granting planning permissions the potential for Changing Places toilets should be considered.*

**Q: What are the ongoing costs of maintaining this kind of toilet?**

JC appreciated that there were ongoing costs in maintaining these toilets, so it would be useful to partner with organisations such as supermarkets. Why shouldn't people with wheelchairs have access to the same facilities?

*The panel would like to know more about national progress with this campaign, whether central government recognise the importance of such facilities and if they provide any assistance for councils or businesses looking to install Changing Places toilets.*

**Parent Carers' Council (PaCC)**

**Ruby Kearns (RK)** told the panel that PaCC represented the families of disabled children from 0-25 years. A lot of the needs are the same as those provided in Changing Places toilets e.g. hoists. ~~Roll over seats were not provided in Brighton & Hove. Like many of the families she~~

represented RK had a disabled son. Because he cannot hold himself safely on a toilet, she had to sit behind him and hold him on the toilet, but when he grows bigger she will not be able to fit. Parent carers of children who used wheelchairs were susceptible to back pain and injury and we were often forced to undertake difficult transfers in these toilets.

There was a need for hoists in accessible toilets, otherwise two people would be needed to transfer her child onto the toilet when he was older.

**Q: What is your experience of using standard disabled toilets?**

RK explained that they were not big enough for power chairs and did not provide sufficient space for two carers. Due to lack of changing benches, parent carers were forced to change their children on dirty floors. She was used to having to carry her child through busy places e.g. shops, trying to find a suitable toilets.

She had not seen any information provided about the location of accessible facilities, and neither had the other people she had asked. This included the support group she ran for families with disabled children aged 0-8 and the wider PaCC community.

RK liked the idea of an App but had not been able to track one down. She wondered if it would carry information about where hoists were located in toilets.

There was a cultural and historical aspect to not providing such facilities, that disabled people used to be institutionalised. It was necessary to recognise the needs of all along the spectrum.

**Q: Are there any toilets which you can use easily?**

RK told the panel it was always necessary for parent carers to plan where they were going. Many wheelchair users, particularly females, have to be transferred to a toilet to urinate. This was a growing problem as due to medical advances in elderly and premature baby care, there were growing numbers of people with disabilities and older people. The Changing Places facility at the Colonnade was great but is far out if you are not at that end of town, an ideal location would be the Churchill Centre. Although at this shopping centre was a woeful lift, and parents of disabled children had been abused by other people for using the lift and have to compete with many parents with buggies and other wheelchair users or elderly people, often waiting for a long time before you can get on the lift.

**Q: Can toilets be built that can meet all needs? Would it be possible to develop facilities that met the needs of people with disabilities, parents with buggies and breastfeeding women?**

RK felt that it would be difficult to find a location which could provide sufficient space, especially if one was using a power chair. Private space was needed for these functions, while breastfeeding would take up a lot of time that would lead to people with differing needs competing for the facilities. It would be really helpful to have larger units, so that you could take push chairs into a facility.

**Q: What would be the gold standard of provision for parents of children with disabilities?**

RK believed that it would mean more facilities sited throughout Brighton and Hove. She suggested to keep costs down and negate the need for each facility to be staffed, there could be a supervisor on a bike that could move round these facilities to offer assistance and keep them clean. It would be good to have key codes to gain entry rather than keys, so one would know who had last used the toilet in order to discourage abuse.

*The panel were keen to hear from RK and PaCC if there were any further suggestions they wished to provide.*

**Q: Do you think provision needs to be placed at strategic points, rather than just placing at Churchill Square otherwise it will not meet the needs of people who live in the outer reaches of the city?**

RK repeated that she felt more facilities were needed, for example an accessible toilet at Boundary Road. It would be good to have facilities in well populated areas to reduce the level of ASB, for instance parents might find Madeira Drive isolated and intimidating on an evening.

*The panel were keen to obtain the latest British Standard for accessible toilets and see if our facilities meet those standards especially post the DDA. If one is meeting high levels of accessibility needs, then one is catering for all.*

**Q: How do you think we compare with other councils?**

J Jones told the panel that Brighton & Hove compared well in the number of general accessible toilets in relation to the city's population. However this was a very spread out city and in some localities a lower level of provision would be needed. We received a lot of calls from other local authorities to ask how were managed to sign up businesses and leisure centres to participate in Use Our Loos.

JJ informed the panel that the £25,000 construction costs of the Changing Places toilet in Madeira Drive was funded by Wettons. J Jones explained that this was a fully attended site, to ensure that the people using the facility were able to use the hoist. The users were expected to sign a declaration that they knew how to use a hoist. The key issue was to ensure that the general public used toilet facilities responsibly. RK suggested that a membership scheme could be effective.

JJ told the panel that the facility at the Level would be more accessible and had been sited there due to the funding opportunity at that location. He thought that it was likely that the city would only have two such facilities. J Jones explained that it would not be possible to charge for Changing Places toilets as one is not allowed to charge for accessible toilets. Access can be gained with the RADAR key and it is fully automatic. JJ repeated that the costs involved in charging: the provision of an attendant and installing an accessible entrance as well as a turnstile, meant that there was not a business case for charging to use toilets.

**Q: Is there a charge for the Can't Wait Card?**

J Jones explained that the revenue raised by the charge for this card went to the charity.

*The panel agreed that it was useful to be reminded of the need for accessible toilets and asked the witnesses to forward any relevant information about this issue to Karen Amsden using [Karen.amsden@brighton-hove.gov.uk](mailto:Karen.amsden@brighton-hove.gov.uk)*

## **The Fed Centre for Independent Living**

Dr John Hastie (JH) told the panel that it was a challenge to capture the needs of people with disabilities, which included:

- Wheelchair users
- People with long term health conditions
- People with guide dogs

However, there was a higher need in the disabled population for toilets. For example, while he was entirely continent he had to use a toilet every hour or two so needed there to be an accessible toilet in range. The standard range of accessible toilets meet the needs of most people and it was important to maintain good standards for all of these facilities toilets. Changing Places toilets were very good, but a full range of toilets were needed. The main comments he wanted to make about the current provision were:

- Where there are accessible toilets, these tended not to be open or hard to find in the evening
- A lot of pubs and restaurants do not have accessible toilets, which mean that public toilets are needed to fill that gap and enable people with disabilities to go out in the city

JH believed that Changing Places toilets were very good for those on a longer day out in the city, where you would be more likely to need that toilet during that day. Even if one used continence pads, it may be necessary to change them while you were out. It felt unfair to be discussing whether to charge for accessible toilets, as this group are more likely to need the toilet and would feel that they were being penalised.

JH felt that the information provided about public toilets in the city was good. He noticed that the spreadsheet had last been updated in January after there had been some complaints about out of date information.

J Jones replied that they had received feedback from BHLINK that changes, in particular the Level closure, had not been updated on the spreadsheet. The previous update had taken place last November and changes were made when there was an alteration to the facilities.

**Q: What is your experience of using McDonalds not as a paying customer?**

JH told the panel he generally sneaked in, but had been met with a good response when asking to use the toilets. He chose venues to go to on the basis of their accessibility. He had found that accessible toilets often became used as storage cupboards, like a pub JH had visited recently. Light bulbs were often not replaced and often accessible toilets were not maintained to the same standard as general use toilets. Another example was wiring around the shelf. He wondered if BHCC were able to encourage compliance, e.g. using Licensing?

*The panel expressed concern that this could mean the toilet was a fire risk and not DDA compliant. In the Planning regime action was taken for failure to comply, so felt that there was no reason why Licensing should not be able to take similar action.*

RK thought that these kinds of issues meant there was such a need for publicly funded facilities.

**Q: In your experience are toilets in the RADAR scheme being vandalised?**

It had not been reported to JH that vandalism was a big issue, but felt that such problems were more likely to be reported to the council. He had not really experienced ASB and thought that it seemed to take place in general use toilets.

**Q: What do you think are the key things the council could do?**

JH observed the following:

- Keep accessible facilities clean
- Provision here was generally good, but not closing any more facilities
- Keep facilities open in the evenings
- The Use our Loos scheme seems good

**Q: Do you think there is a case for not providing any general use toilets, but making all publicly available toilets accessible?**

JH felt that it was important to have general use toilets as well, because generally accessible toilets are used for a longer stretch of time per visit. Separate accessible toilets were preferred, so that users of accessible toilets did not need to feel they were holding someone up.

J Jones gave an example of a mixed facility being built in Rottingdean where there was one larger accessible toilet alongside general use toilets.

The panel felt that it was important that accessible toilets were for the people who needed them.

JH told the panel that they had been asked by the council last year about getting rid of RADAR keys to enable transgender people to access these facilities. However people with disabilities did not want to get rid of the RADAR key, as usually these facilities are in a better condition than the general accessible toilets.

**Crohn's and Colitis UK, Brighton & West Sussex Group**

Andy Player (AP) explained that both Crohn's and Colitis were bowel conditions and it has been estimated that 1 in 250 people have this condition in the UK. This would represent around 1,000 in the city. The Sussex University Hospital have over 2,000 people on their books in the area with these conditions, which is thought to be a significant underestimation of the true number. Therefore a significant number of people in the city and surrounding areas suffered from these conditions.

The conditions typically begin in teenagers and young adults and there was a whole spectrum of severity of symptoms. The bulk of sufferers here were people of working age who either work in Brighton or commuted. These health conditions have a significant impact on people and can result in hospitalisation when at its most serious, requiring recuperation afterwards. Even when the condition was stable, it would still involve frequent and urgent diarrhoea, acute abdominal pain, the sudden urge to use the toilet and severe fatigue: making it difficult to run to the toilet.

Sufferers experience anxiety, and the need to plan meticulously and know where all the publicly accessible facilities are when going out:

- To school
- To work
- Socialising
- Taking care of young children

For those who had experienced public faecal incontinence the experience could be devastating and impact on their ability to feel engaged with society. While coping strategies often included learning every public toilet in the whole of the city, many people chose not to engage in activities which would mean they needed to go out.

Crohn's and Colitis UK had carried a survey of around 1,000 young people which found that:

- 43% felt seriously isolated at the point of diagnosis and for years afterwards
- 25% had found that their condition made socialising almost impossible, with 18% attributing this to 'always needing to know where a toilet was'

A survey of local members in Sussex (around 30 respondents) was conducted in response to the proposed cuts to public toilets in the city in 2012. The survey confirmed that most members needed to use publicly accessible toilets nearly every day, especially when travelling. 75% flagged up the need to have public toilets next to transport hubs and 66% had used public toilets

to clean themselves up after experiencing faecal incontinence. The majority carried clean clothes with them, in case they were needed.

AP told the panel that when the survey asked **where** publicly accessible toilets were needed, the response was in all parts of the city, particularly where people:

- Travel
- Socialise
- Shop

This would enable them to 'pursue ordinary activities'.

The survey asked '**when** do you need public toilets in Brighton & Hove and an emphasis was placed on evenings because:

- People were commuting home, returning late from work or attending lectures
- To enable socialising

If asked what changes they would like to see to public toilets:

- More not less
- Facilities open in the evening
- While urinals would not help those with Crohn's and Colitis, it could free up other facilities to be used
- Signposting of toilets
- It was felt that the website information was great and would welcome an App

J Jones explained that the outdated signposts should all be removed now as they now could point to toilets which were not there any more. AP asked if the service could think of other ways to signpost these facilities.

In the experience of AP a lot of people with Crohn's and Colitis used RADAR toilets especially at railway stations. The provision by Network Rail was quite good, however there were instances of ASB and a rough sleeper using the toilet. It was a big issue that doors were locked after dark, which is a particular problem in winter. People with Crohn's and Colitis cannot operate on season hours and it would be great to work with the council to resolve this issue.

AP explained that the Can't Wait Card was provided as part of the Crohn's and Colitis UK membership and most people joined the scheme if they had the condition or were a relative or carer for someone with the condition. The card was automatically sent out to applicant, so relied on trust but people only tended to use them when needed.

AP's experience of using the card was mixed, but generally good. The benefit of the card was that it cuts out what can be a very embarrassing discussion with the person working in the premises which has the toilet. In general he had very good responses and had never been turned down. If the business did not have a public toilet, then he had been taken by staff to their toilet and those people had to wait for up to half an hour outside until he had finished using the facilities. However the card was not a guarantee that the organisation will agree, which can be a distressing experience. According to their survey, the majority of respondents said that they would find a shop, if could not find a publicly accessible toilet. Over half did say that they would soil themselves and then go home as soon as possible to clean up. One respondent had reported that they had mostly been refused help when asking if they could access toilets to use.

AP felt that it was important to give people confidence and then the card could be a lifesaver. If the council was to back this scheme and communicated this, it would increase the confidence of card holders. This would raise the awareness of businesses and employers and getting them to understand that people could be in genuine need.

J Jones told the panel that the service was keen to tie this to the Paralympics legacy and the increased awareness of people with disabilities.

*The panel felt that accessibility was fundamental and at the core of what was needed. It was important to look at range of measures rather than putting them in a scale of importance. The value of the proposed link between the Can't Wait Card and Use our Loo is that it ties up needs and accessibility, which could free up resources for higher levels of need. In the evening it would be good to widen the access drawing on resources such as pubs and restaurants.*

RK reminded the panel that what was needed was awareness, confidence and compassion. There should not be a problem of quantity, rather it is making sure those toilets meet the needs of a range of groups.

**Q: Why were RADAR toilets locked in the evening, is this a resources issue?**

J Jones told the panel that one of the primary issues was that they became a prime site for rough sleepers, which posed difficulties for cleaning staff attempting to close the site.

*The panel heard that this meant that vulnerable user groups were then competing for this space and decided that they would like to hear from other local authorities about how they struck a balance on this issue: opening up access v. pressures caused by ASB.*

**Q: We are aware that one of the issues is that councils have the 'power' to provide toilets but not a statutory 'duty', is Crohn's and Colitis UK lobbying national government about this issue?**

AP told the panel that he felt it should be a statutory duty on councils.

The panel will consider if it would be useful to lobby government on this issue, as it seemed that this was a fundamental public service which needed to be funded properly.

RK wondered if the DDA legislation was relevant and whether compliance with the standards needed to be more policed and funding offered to assist in complying. What happens to businesses which do not comply, as for example the Café Nero in Churchill Square does not have an accessible toilet. *KA to find out the relevant details in the DDA legislation.*

AP suggested that the council should come up with a % it expected to be spent on toilets from any resources secured by the Late Night Levy. That businesses should have to comply with this to avoid a 'toilet tax'.

A member of the public queried why the collection of human waste was not treated equally with the collection of household waste, in terms of legislation, policy and resources. Another member of the public revealed that he had acted as a mystery shopper today and asked the reception at Brighton Town Hall for a list of accessible toilets and had been supplied after some time with a spreadsheet dated April 2012 which only included 40 toilets. He believed that public access points and Tourism facilities should be able to access up to date information at the touch of a button.

## BHLink

David Watkins informed the panel that BHLink had received 80 negative comments about public toilets in the city, these included:

- Over 50 about limited opening times and closing down facilities
- The lack of toilets in Kemp Town
- The importance of having facilities of a sufficient size for people with children with disabilities
- Children had been scared by drug use in toilets
- More child friendly units were needed
- The importance of clean facilities
- The need to increase awareness of the Can't Wait Card

The Toilet User Group welcomed the effort and commitment of the council in getting businesses to sign up to the Use our Loo scheme.

BHLink wanted to highlight the importance of the following factors in relation to publicly accessible toilets:

### **Very important**

- Location
- Cleanliness
- Opening hours
- Safety
- Good external lighting

### **Important**

- Fixing faults
- Finding baby changing facilities
- Attended facilities

In relation to the particular needs of older people, the key concerns were:

- Gaps in locations, e.g. not enough toilets between Churchill Square and Open Market, lack of toilets in Hollingbury Park
- Opening hours
- Safety
- Some older people might not want to use certain facilities, such as pubs, if they were not a customer of that business

If there was insufficient provision, then older people would not want to go out thus increasing their isolation.

The level of need for publicly accessible toilets would increase and the aging population grows. The number of people over 50 years who will reach the age of 100 is set. Up to 35% of people over 65 have some form of incontinence and it was an inevitable part of reaching old age. If there were not sufficient facilities, then increasing numbers of older people would remain indoors. This would lead to an increased need for social care and reduced exercise rates in this age group.

The BHLink Toilet Group had demonstrated the value of a forum re: toilets in the city. There was a unanimous feeling that the group should continue as the functions went to Healthwatch, and this could be reflected in the panel's recommendations. Healthwatch was a pro-active group,

unlike BHLINK who were reactive, and a toilet forum established by them could be used as the place to maintain all the information about publicly accessible toilets. BHLINK as a statutory body was free of party politics. It would be interesting to see how the health service would react to the pro-active nature of Healthwatch and may not be so positive about them. He believed that the NHS should make a contribution to publicly accessible toilets.

DW believed that people did not like talking about toilets, however the city was being used by certain groups as a public urinal in areas such as St Anne's Wells Garden. Schools should be used to convey public health information about this issue as they were producing the 23 year olds urinating in the streets. The situation was not helped by the fact that there used to be urinals everywhere in the city.

*The panel reassured DW that they had taken evidence about urinals, received pictures and specifications of them and would look to see if one could identify sources of funding for them. This would be meeting the needs of men, but the evidence suggested that men were responsible for the majority of public urination. Although they informed DW that evidence had also been received to say that even if facilities were provided, one might not be able to get drunk 25 year olds to use them.*

DW welcomed this scrutiny panel as he felt that such active scrutiny was one of the most important things which a council can do.

The panel felt it would be useful to explore if there were any other avenues of funding and look at Europe for examples.

JH informed the panel that charges were normally made in Europe and this may even be for accessible toilets.

JJones told the panel that the level of the public toilet provision in the city compared very favourably to other locations e.g. 2 in Portsmouth, 14 in Isle of Wight (even though a massive tourist influx). The lack of a statutory requirement to provide meant lowering levels of provision in some parts of the country and we were one of the few areas that had opened new facilities in recent years. However new businesses were still opening up and these could be encouraged to offer public access.

DW told the panel that there was the need for an App, but that toilets did not have an address. KA agreed to find out from ICT about this issue.

## **10. DATE OF THE NEXT MEETING**

The next meeting will take place in Committee Room 1, Hove Town Hall at 10am on 26<sup>th</sup> February.

**11. A.O.B**

There was no other business.

Signed

Chair

Dated this

day of

## 4. Minutes of the public evidence gathering meeting - 26.02.13

### BRIGHTON & HOVE CITY COUNCIL

### SCRUTINY PANEL ON PUBLICLY ACCESSIBLE TOILETS

10.00am 26 FEBRUARY 2013

COMMITTEE ROOM 1, HOVE TOWN HALL

### MINUTES

**Present:** Cllrs Kennedy, Robin and Cobb and John Eyles (OPC)

**Also in attendance:** Jenny Cooke (BHCC), Mike Bone (British Toilet Association), Tim Nichols (BHCC), Richard Davies (BHCC), Martin Lawrence (Hove Business Association), Janet Woodjetts (Hove Business Association), Tom Hook (BHCC) and Karen Amsden (BHCC)

**Other Members present:**

### PART ONE

#### 12. CHAIR'S INTRODUCTION

The Chair opened by thanking people for coming to give evidence to the final meeting of this scrutiny panel, which was focussing on looking at the way forward for this service. She explained that Cllr Pete West was not able to attend the meeting due to the ill-health of a family member and time was given for the panel and witnesses to read his submission (see attached).

#### 13. PROCEDURAL BUSINESS

There were no declarations of interest or party whips.

#### 14. MINUTES OF THE PREVIOUS MEETING

Panel members accepted the draft minutes of the previous meeting on 11<sup>th</sup> February as provisional, as 2 witnesses from the previous meeting had not made any alterations.

#### 15. WITNESSES

The panel began by raising a number of issues in relation to Cllr Pete West's submission.

**Q: Has the contract for the Roedean mini golf course been let?**

Jenny Cooke (JC) told the panel that the lease for the café had been re-signed and was in operation and they hoped to have the lease for the course signed and then operational again in April 2013.

**Q: It is good to see that council intends to ‘focus its efforts in the areas it’s most needed’ including the council opening up its own toilets. However I understand that the toilets in Hove Car Park will now only be open at the weekend? This was a surprise because it was a busy site.**

JC explained that this change formed part of the budget savings which had been agreed last February. These toilets would now only be open on weekends and bank holidays and this had been agreed due to the alternative provision at Hove Town Hall and Goldstone Villas. The toilet will still have an attendant when it is open.

*The panel felt that this threw into relief the issue that this was not a statutory service which local authorities had a ‘power’ not a ‘legal duty’ to provide, so was vulnerable to changes due to budgetary pressures ,which could be reflected in the recommendations.*

**Q: Would it be possible to enter into joint procurement arrangements with neighbouring authorities?**

JC confirmed that the current contract with Wettons ended in 2017 and that a nearby authority had recently approached the Scrutiny Team about entering into such discussions, which may be able to achieve some savings. This will be considered for future contracts.

*The panel confirmed that it had not been possible to secure a witness from the hospitality sector to come and give evidence to the panel and would welcome ideas on how to engage with this sector.*

## **British Toilet Association**

**Mike Bone, (MB)** told the panel that the British Toilet Association (BTA) had been established in 1999 and represented all types of providers, suppliers and users of toilets in the UK. It was a not-for-profit organisation based in Bangor, Northern Ireland and their President was Sir William Lawrence. Members of the BTA included the Changing Places charity. The management committee included representatives from local authorities (including JC on behalf of BHCC), commercial suppliers and those representing their own private concerns such as disabilities.

The first focus of the BTA had been on lobbying government on the need for public toilets and in 2008 assisted the Communities and Local Government team (CLG) in the production of a Strategic Guide on the issue.<sup>2</sup> A Select Committee<sup>3</sup> was then established as a number of MPs felt the need to pursue this issue. However the provision of public toilets has still not been made a statutory requirement.

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<sup>2</sup> CLG, Improving public access to better quality toilets – a strategic guide, 2008

<http://webarchive.nationalarchives.gov.uk/20120919132719/http://www.communities.gov.uk/documents/localgovernment/pdf/713772.pdf>

<sup>3</sup> The provision of public toilets, 2008 <http://www.publications.parliament.uk/pa/cm200708/cmselect/cmcomloc/636/636.pdf>

Since then the change of government and the worsening economic climate has meant that it did not feel right to lobby central government and the focus has moved to local government. This has included lobbying councils who were shutting services and increasing the amount of advice given to providers.

It was essential for providers to understand what users want and ensure that the services meet their needs.

The BTA was a founder member of the World Toilet Association, a member of the British Cleaning Council and a partner in Bog Standard (a campaign to promote better standards of toilets for pupils <http://www.bog-standard.org/>). The BTA had been involved in setting BS 6465 for Sanitary Installations.

MB was the Managing Director of the Loo of the Year awards in which facilities were judged against 100 criteria and could be awarded a Bronze, Silver, Gold or Platinum. The BTA were looking for more, and better, toilets in the UK.

**Q: Brighton & Hove has won loo of the year award, which of their facilities were successful?**

MB explained that last year, 34 of the city's toilets had been entered in the competition and all of these facilities had been graded between Gold-Silver. There was a national league for local authority toilets in which points were awarded depending on the number of toilets entered into the competition and then points for each grade awarded e.g. 6 points for Platinum. Brighton & Hove had been graded as the top local authority in 2010, 2011 and 2012, but had not yet won the 'overall' award. Only five councils had won the overall 'local authority' national award (includes schools and leisure centre toilets) including:

- Staffordshire in 2012
- Ceredigion
- Westminster

**Q: What are these national award winning local authorities doing?**

MB explained that Ceredigion County Council had spent a lot of money, was continuously upgrading its facilities, placed a high priority on provision and had very inclusive facilities including Changing Places toilets. Staffordshire County Council performed well over a range of categories including leisure centres and schools.

**Q: A lot of the provision in Brighton & Hove is made up of converted buildings, but what is the best type of toilet facility if you are starting from scratch?**

MB believed that this depended on what needs you want to meet, for example:

- Attended or not
- Helping the night time economy e.g. Urilift
- Providing access for all

Variations in facilities could include being built from scratch, purpose built, delivered by a trailer or being an automatic toilet. An example is the 'pissoir' which is an open urinal that has been installed by a number of towns and cities in drinking areas. These facilities can be used by up to four men at a time and collect the urine of 1,500 people in a night. This presented a significant alternative to people urinating in shop windows.

**Q: Is the 'pissoir' as demountable as do not need to sink into the ground, and are they cheaper? Since there are no funds for this kind of facilities, are there any examples of where businesses, such as pubs and clubs, have agreed to set up or fund such facilities?**

MB explained that Brighton & Hove had been a forerunner in setting up a 'community' or 'partnership toilet scheme' which was a voluntary scheme that did not pay participants. The schemes which did remunerate businesses ranged from £600 to £1,000 per annum. He did not feel that any local authority had succeeded fully with such a scheme, and problems they had encountered included:

- Not an inclusive scheme in that the majority of participants might be pubs, which were premises that many may not wish to use for cultural reasons, religious beliefs or when are out with young children
- Shops spend a lot of money on their facilities and do not want to open them up to the public for fear of Anti-Social Behaviour (ASB) and abuse

MB mentioned three local authorities which were still operating such a scheme. The originator, Richmond, did not seem to be effective in the opinion of MB as it was not possible to locate the signs. In Bristol there were 40 organisations opening up their toilets, however MB was not sure whether these facilities were inspected, maintained to a specific standard or accessible. He was concerned that a lot of businesses did not have fully accessible toilets.

MB believed that you needed to spend sufficient money on setting up such a scheme, including:

- Publicity
- Strategy
- Signage
- Entering into an agreement with each business

This scheme could only work as a business proposition, rather than expecting organisations to help you out because local authorities could not afford to pay for toilets.

**Q: It appears that lack of funding is the perennial problem for this service, are there any successful ways of getting external funding?**

MB explained that the starting point needs to be to agree a strategy which included:

- Aims for the service
- Statement of what the organisation wants to achieve
- Assessment of whether there are the right number of toilets and are they in the right place? This could assess whether some toilets could be shut down in order to maintain some other facilities
- The potential for charging for toilets. A lot of other local authorities have moved over, or are hoping, to cover the cost of installing and running the toilet by charging. An example of a new 'pay as you go' public toilet is the Jubiloo<sup>4</sup> which was set up on the South Bank in London by Healthmatic a national provider of public toilets to local authorities. It was a commercial venture as there are 13m visitors to that location each year and no public toilets. The charges were covering the running costs after 9 months, with a contribution to the construction costs. This demonstrated that one could charge for a high quality facility in an area with sufficient traffic. It had 2-3 attendants which reduced the cleaning and maintenance costs and enabled people to feel safer, reducing ASB and sexual activity.

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<sup>4</sup> Press release on the Jubiloo

[http://www.southbankcentre.co.uk/sites/default/files/press\\_releases/The\\_Jubiloo\\_release\\_FINAL.pdf](http://www.southbankcentre.co.uk/sites/default/files/press_releases/The_Jubiloo_release_FINAL.pdf)

Where toilets were attended then over the life time of the facility the costs tended to be lower.

JC told the panel that she agreed that attendants reduced costs by lowering vandalism, which can be major as a few years ago a number of toilets in the city were set fire to. When savings had to be found last year, the number of hours worked by attendants was reduced, but this did mean that ASB rose and costs went up. Charging seemed to succeed where there was no alternative free toilet to resort to. In Brighton & Hove there was always a nearby facility which was not charged for.

*The panel recognised the benefits that could accrue from a strategy for publicly accessible toilets.*

JC gave an example of the benefits of taking a strategic overview, where leases in parks could be let and the responsibility for the existing public toilet be included, or the café could be expected to provide their own, then this could free up funding for provision where it was needed in another location in the city.

MB emphasised the potential for gaining sponsorship for toilet facilities and Wettons were an example of this in Brighton and Hove. Other potential sources of funding included s.106 and CiL, e.g. Tesco's having to pay for a local toilet in the West Country.

**Q: Brighton & Hove seems good for toilets compared to other local authorities, what happens to towns like Southampton when all the public toilet provision is closed down?**

MB emphasised the need to look at the user perspective. This city needed to provide both car parks and toilets, if it wanted to cater for:

- Tourists
- Visitors
- Residents

In his experience those local authorities who have shut public toilets have provoked a large local reaction and very few of these councils have closed all the facilities. There was a high level of opposition, especially where there was a significant population of people with disabilities or there were few alternative toilet facilities. For example, Cornwall County Council and Torbay threatened to close its toilets 18 months ago, but have yet to do so. Where the whole toilet provision had been closed down in a location, such as in smaller towns, it was an indication of a place in decline. This was most likely to happen in locations where trade was down and accompanied shops and businesses shutting down too. This could lead to a situation where only a big supermarket, such as Tesco, was the only business left open in the area when all other firms had closed down.

MB believed that if you looked at the perception of users, then you would find a solution to providing toilets in your locality.

**Q: What alternative sources are there for funding Changing Places toilets?**

MB gave examples of Changing Places toilets being funded by ASDA (Sheffield), Gatwick Airport and Network Rail. It was essential to talk to local organisations rather than it being assumed that local authorities could be relied upon to provide these facilities. He believed that s.106 and CiL could also be used to fund Changing Places toilets. In some local authorities, Social Services had opened up Changing Places facilities in day centres, up to public access. There were 3 elements to the cost of setting up a Changing Places toilet:

- Significant size to enable 2-3 people to use the facility with a wheelchair and sufficient room for a hoist and a load bearing surface
- £10,000-£15,000 of equipment needed
- Ongoing maintenance costs

At £20,000-£25,000 the cost of the toilet in Brighton & Hove was at the higher end of the scale for Changing Places toilets.

**Q: The city has received some publicity recently about its gender neutral toilet provision, what is your view?**

MB told the panel that unisex toilets were a great idea, especially when it was only possible to provide one unit in a location.

JC informed the panel that the only change had been for the council to refer to the units as gender neutral, rather than unisex, in order to better meet the Equalities Act. The form of toilet provision had been the same for a number of years:

- Single use cubicles for all
- Providing complete privacy and reducing ASB
- Only use symbols on the front of the unit

The council had just put a sign on the fencing for the unit in Rottingdean to explain why the sign was being changed. TH added that this notice had been conflated with the recent Trans scrutiny report, where no link existed.

**Q: It would be useful to have suggestions of partners we could seek to help us secure funds to meet the needs of the night time economy**

MB told the panel that he was aware of different kinds of toilets being used, including:

- Urilifts
- Pissairs
- Mobile toilets being put in place each weekend in areas such as Scotland. Portable provision was in particular use at times such as New Years Eve.

MB finished by offering his support to Brighton & Hove, who had one of the highest number of publicly accessible toilets in the country (83). He felt that these facilities were quite well maintained and inclusive, however there were maintenance issues. He offered the help of the BTA with the development of a strategy as they had worked with other authorities such as Bath, Belfast and Westminster.

## **Regulatory Services, BHCC**

**Tim Nichols (TN)**, Head of Regulatory Services explained that there were four key relevant areas:

- S.20 - 1976
- Regulatory climate
- Late night levy
- Night Time Economy

**Section 20:** If a business was providing entertainment it has to provide toilets to a certain ration. A standard for Brighton & Hove was developed in 1983. If a business did not provide this they

could be served with a notice and then failure could result in a prosecution or being served with a disnotice. Generally this has not been needed as a remedy since the 1980s, as standards tend to be complied with when planning permission is complied with. There is a sliding scale of expected provision from 1 gender neutral unit per 15 customers. However this standard does apply to customers.

**Regulatory climate:** officers were conscious of the need to be able to justify regulation and ensure that they were enabling the creation of economic growth.

**Late night levy:** TN felt that it was unlikely that this levy could be used for this purpose as it was meant for Police and councils to use for extra enforcement costs. Therefore he was concerned that this could be subject to challenge if the levy was used to fund publicly accessible toilets. However no-one had imposed the levy, so it was not known how it could be used.

**Night time economy:** The council had a partnership with a number of organisations relating to the night time economy, but felt it was unlikely that we could persuade them to open up their premises to the general public as the organisation would be already engaged in controlling their capacity and ensuring that they did not pose a fire risk. The people who were fouling highways were not doing this because there were insufficient toilets. Urinating in public was not outright offence, but he understood that action could be taking using a S5 of the Public Order Act to issue fixed penalty notices.

**Q: There have been reports of the police issuing buckets and mops and asking people to clean up any mess they have created. Is such a scheme workable? Would the provision of night time toilets such as Urilift, at least mean that the police could direct people to these facilities?**

MB informed the panel that Hackney council put out 12 'pissoirs' every weekend. Each facility could collect 1,200 litres and they are full up each time they are collected at the end of the weekend. The BTA had done some work on the Late Night Levy with Bath and North East Somerset and they were scheduled to start charging this levy later this year.<sup>5</sup>

JC explained to the panel that there used to be 24 hour facilities in the city, this had not removed late night urination but helped the situation.

**Q: If one was trying to develop a toilet action plan, how do you think that council services could best work together on this issue?**

TN was not sure what such a plan would look like, but thought it would be a good idea to work out which toilets to keep. However publicly accessible toilets were not in his top 20 worries. While there had been the decision to introduce a Late Night Levy but 70% of the money raised would go to the police. They had received no such request from the police. He believed that it would be very difficult to sell the Levy to businesses, but wondered whether the police might offer to underwrite the costs of developing the Levy?

TN reminded the panel that 40% of city residents worked in the hospitality sector and what would be the impact of taxing this sector. He also was not sure what the money would be spent on. This issue became even less clear when one looked at the potential exemptions e.g. Business Improvement Districts. This would make very difficult to predict the income which could be generated.

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<sup>5</sup> [http://www.bathnes.gov.uk/sites/default/files/siteimages/Bins-and-Recycling/public\\_toilets\\_provision\\_strategy\\_-\\_december\\_2011\\_adopted.pdf](http://www.bathnes.gov.uk/sites/default/files/siteimages/Bins-and-Recycling/public_toilets_provision_strategy_-_december_2011_adopted.pdf)

*The panel did express concern that the proposal to not include Business Improvement Districts could mean that this Levy could then impact on quieter pubs in outlying areas, rather than busy pubs in heavily populated areas at night.*

## **Major Projects BHCC**

**Richard Davies (RD)** explained that he was the project manager for the Open Market redevelopment. Part of this project was the replacement of the public toilets in Marshalls Row. This project had reached an advanced stage with partners and gone through the Planning process. Then the project had been subjected to a number of years of cuts.

There was concern within the development for the public to be given access to toilets which had originally been only for traders, due to the cost of maintaining them. However, the provision for traders was quite generous.

A community interest company (CIC) has been created to take on the market and manage it. The company was sympathetic to running the markets and wanted public toilets there for visitors rather than none, if the Marshalls Row toilets were shutting. The site where the toilets had been going to be built at Marshalls Row, was now going to be used to build an extra market site. The income generated from this site was then be used to build and run the toilet. This was now subject to Planning consent, so an application now has to be put in to vary the scheme. The main point was to provide a toilet not at the cost of the council which would raise money to use towards other facilities.

JC told the panel that the main users of the Marshalls Row toilets were the traders. These facilities were very small and subject to very high levels of ASB (even when visited six times per day) and inaccessible. In addition the number of facilities being provided in the new development were greater than those provided in the existing toilets and would be accessible. They would also then be monitored by market staff whereas the existing provision was unattended.

RD explained that the market staff would be there all the time the market was open. The facilities being open to the public would mean consumer pressure to maintain the standard of cleanliness. While the CIC would recycle profits back into their company, the toilets will be subsidised as the rent from the extra stall probably will not cover all the costs relating to the toilet. The s.106 will probably need to be varied so the CIC will have to provide this as part of the Planning process.

**Q: It is hoped that this project can show that with all new major developments there is the potential to require toilet provision. Is this practicable?**

RD believed that it depended on each scheme, for example this could work well in a scheme where there was public use such as a supermarket. However if it was office accommodation, this would be creating private space and would increase the costs of the development.

*The panel believed that it seemed sensible to pursue including this requirement to make toilet provision publically accessible in tourist developments.*

RD explained that s.106 and CIL would face a lot of demands for the funds they opened up and it would depend where toilets were in the priority queue. It was up to the council to determine these priorities.

**Q: The Sainsbury's in West Hove has publicly accessible toilets and it seemed like a natural inclusion in the development? However it does seem that some other**

**supermarkets were not so enthusiastic, e.g. Tesco's, can one require these facilities in all supermarkets?**

RD told the panel that it depended on how sympathetic the developer was.

In the experience of JC, Sainsbury's was generally very good, while Tesco's seemed less sympathetic. It appeared that while CIL could only raise a small amount of funding for publicly accessible toilets, the City Plan could include a requirement to provide general access to toilets in tourist developments which have already built accessible toilets.

*The panel welcomed the good news of this Community Interest Company.*

### **Hove Business Association (HBA)**

**Martin Lawrence (ML)**, Retail Ambassador, explained that he had conducted a telephone survey of local retailers and had found that none were members of the Use our Loos scheme. He then read out the comments from the HBA in relation to the following questions.

**Q2: The Council is considering altering this scheme to focus on enabling access to toilets for people who have a particular medical need, rather than encouraging businesses to open up their toilets to the general public. If the Use our Loos scheme was only open to holders of the 'Can't Wait Card' do you think that members of your association would be more likely to participate in the scheme:**

*'My toilet is very inaccessible upstairs and has stock in it.'*

*'No – only for my regular customers in an emergency. I don't want people coming in off the street to use our loo.'*

*'Needs supervision which ties up staff.'*

*'Will let small children of regular customers use it if desperate.'*

*'Health and safety issues.'*

*'Occasionally let elderly, but it is very difficult as we have to supervise them into the area and we have staff coats, etc in the toilet area.'*

*'We can't its physically impossible. Head of office says that our public liability insurance only covers shop floor area.'* (it was then queried whether this was true)

*'Only in a dire emergency. We would not join the Can't Wait Card.'*

*'It would not be nice for our staff as it is their only toilet.'*

*'Who is going to clean the toilet.'*

*'Our staff keep their handbags in the staff room and the loo is off the staff room.'*

**Q3: The panel has heard evidence of the importance of publicly accessible toilets in enabling people to use the city for activities relating to shopping, tourism and our night time economy. If the local authority was no longer able to fund this service in the future, do you think that businesses would be willing to step in to plug this gap?**

According to ML there was a resounding 'no' from all members contacted, who made the following comments:

*'Ridiculous idea.'*

*'Council should make adequate provision – we are supposed to be a tourist town.'*

*'Why have so many toilets been shut already.'*

*'We need more public toilets not less.'*

*'It just would not be possible.'*

ML explained that the respondents were typically single unit, small businesses, which could be significantly impacted by opening up their facilities. For example he had allowed a little boy to use his businesses toilet and he had blocked up the entire facility.

Portland Road conveniences had been removed and so now it was not possible to direct people in need to them.

*The panel were pleased to be able to hear from the business community. Those who had experience of working in small retail outlets understood the issues raised today; including leaving the shop unsupervised, security, insurance and accessibility.*

**Janet Woodjetts** (JW), Retail Ambassador, explained that she had extensive retail experience of being a multi-site manager and working for a national retailer. She had found that even the multiples did not have good toilet facilities. The majority of smaller outfits in Churchill Square had to rely on using the public facilities. The toilet was most likely to be next to the stockroom and be the least looked after space in the shop. There were also security issues as the toilet tended to be sited next to the stockroom.

JW was concerned that one could apply for the Can't Wait Card online, which could open up the possibility of fraud to gain access to the back end of a shop. There was a huge amount of internal theft in retail which would detract from people in need. For this reason, she could see why retailers did not want to participate. Many were alone and would have to leave the shop unattended or allow the person to go in the facility by themselves.

JW felt that there had to be massive commercial opportunities from our public toilets. One could hire out space to organisations such as Proctor and Gamble to e.g. sell sanitary products/advertising to their target audience.

JC told the panel that there was a corporate advertising contract being let which may include public toilets.

*The panel asked to receive an update on Corporate Sponsorship to look at the potential for engaging e.g. large breweries, as this could provide some funding to meet the toilet needs of the night time economy.*

JW suggested that one should explore the Corporate Social Responsibility (CSR) policies of organisations in the city to gain a strategic view of what they were trying to achieve. For example Tesco have a CSR policy regarding the community.

*The panel could see that it may not be possible for the council to offer a sufficient financial incentive to cover the costs to small businesses if they were to participate in this scheme. Therefore it would be useful to explore the issue of sponsorship.*

ML told the panel that he felt that was not a lot of toilet provision in the evening at the Seafront, which led to night time soiling on the beach. JC explained that in summer these facilities were kept open to 10pm at the earliest. However it was not practicable to keep them open longer due to:

- Costs
- ASB, which could place the users and staff in jeopardy

There used to be some 24 hour fully automatic units which were not popular as they made people nervous. People used RADAR keys to gain access to certain facilities and people were living in them and using them for anti-social behaviour, so now these units were shut at night.

## Round table discussion

MB said that while the feedback from the businesses today had related to small businesses, there may be greater potential to involve larger businesses, who had more than 15 staff.

JW believed that a system would need to be put into place to help security, for example some larger businesses had visitor books. However this would add a layer of complication to their work. MB felt that a more productive area would be to look at the leases of public toilets in parks, and potentially being allowed to gain access if made a purchase at the park café. JC gave the example of the lease at Aldington Rec which had been re-let with the owner of the café taking on the responsibility for the toilets. This was working well and this approach would be used again at more sites. She believed it was important to look at our building stock and how to make the best use of it.

MB told the panel that while the BTA was not lobbying national government about statutory duties at the moment it was working on projects like the toilet map for the UK. They were in talks with the DCLG regarding this project, which was similar to the work done in Australia. Their approach was to encourage, rather than forcing as it had been like banging their head against a brick wall.

*The panel were keen to know what the BTA view was on public health and toilet provision, given the recent changes to responsibility for public health.*

MB told the panel that toilets were an important part of public health. A lot of people needed to know where their nearest toilet is, and if not able to reach one, could end up in hospital. When people were away from home, people need toilets. Groups with the most immediate needs included:

- Pregnant women
- People with Crohn's
- Babies

*The panel concluded the meeting by commenting on the need for lifetime cities, public environments that are accessible throughout one's life. Public toilets were a key part of this. However this need had to be balanced with economic realities.*

## 16. THE NEXT STEPS

The Chair reminded all present that this was the final public meeting of the scrutiny panel on publicly accessible toilets. The panel would now consider the evidence and were intending to produce their report and recommendations in the spring. The panel wanted to thank everyone who had given evidence or submitted information in writing to them.

If anyone wanted to submit further written evidence, could they please email [Karen.amsden@brighton-hove.gov.uk](mailto:Karen.amsden@brighton-hove.gov.uk).

Finally the Chair thanked all those who had come and shared their knowledge with the panel today.

## 17. A.O.B

There was no A.O.B.

Signed

Chair

Dated this

day of

## 5. Written Evidence

### A. The public health implications of public toilet facilities

#### Background

The purpose of this paper is to provide background information for the Scrutiny Committee on the public health implications related to public toilet facilities. This paper describes the public health implications of inadequate public toilet facilities. It is based mainly on evidence provided to the National Assembly for Wales Health and Social Care Committee in March 2012.

Almost everyone will use a public toilet at some time in their lives. However certain groups of people such as the elderly, the disabled, families with young children, people with ill health particularly with bladder or bowel conditions, the homeless and visitors to an area are likely to use them more frequently.

In the NICE guidelines on the management of urinary incontinence in women it references a study which found that of individuals over 40 years of age, 33.6% of the population reported significant urinary symptoms but only 6.2% found these bothersome, and only 2.4% (1 in 40 people) both bothersome and socially disabling. Urinary incontinence has a higher prevalence amongst women than amongst men. In the NICE guidelines on the management of faecal incontinence it is estimated that 0.5–1.0% (1 in 100 to 1 in 200 people) of adults experience regular faecal incontinence that affects their quality of life.

As of June 2012 there were 81 publically accessible toilets in Brighton and Hove, 44 of which were the traditional public toilets, 18 of which were in libraries, museums and leisure centres and 19 were in the “use our loo” community toilet scheme.

#### Potential public health implications

##### Implications for individuals

The key points submitted to the National Assembly for Wales Health and Social Care Committee about the impact of inadequate toilet provision on the health and social wellbeing of individuals were:

- People with urinary or faecal incontinence or who suffer a sense of urgency because of a medical condition such as Irritable Bowel Syndrome need to be able to access a toilet quickly and, if they are not confident that they will be able to, may not leave their home because of the fear of being incontinent in a public place.
- Some people are so afraid of being unable to access adequate toilet facilities that they stay at home and become socially isolated, inactive and depressed.
- Older people are more likely to have continence issues, often needing to use the toilet more frequently and having a sense of urgency. Some people try to reduce the need for them to use the toilet by reducing their fluid intake during the day, with the associated risk of becoming dehydrated, or avoiding taking their diuretic medication before they leave home.
- Some people with conditions such as Ulcerative Colitis or Crohns disease (estimated combined prevalence of 150-300 people per 100,000) may carry a card issued by their society which they can use to support their request to use toilets, other than public toilets, in an urgent situation.

##### Impact on the environment

- Inadequate public toilets can result in street urination and fouling. At night this is likely to be related to the consumption of alcohol, and the lack of 24 hour public toilet availability.
-

Urinating and fouling in the street is naturally, likely to affect the general wellbeing of residents living nearby.

- Although aesthetically unpleasant there is generally little risk to health from street urination as urine is sterile in healthy people, and the risk of infection in the street from the urine of people with urinary tract infections is very low.
- Faeces can spread disease, but this requires close contact with the faeces. In the evidence to the Welsh Assembly it was suggested that children are the group most likely to be at risk from playing in areas where people have defaecated.

## **General Comments**

For everyone who uses public toilets they need to be easy to find, easily accessible and clean, but for people with urgency or incontinence conditions they need to be confident that they can get to the toilet in time. Therefore in planning the location of public toilets the distance between toilet sites should be taken into consideration. This also applies to main walkways such as the seafront.

Many people will have their own coping mechanisms for managing their potential incontinence. This may include fluid restriction, using toilets in café's and restaurants or within shops and shopping centres. But this also raises an inequality issue for those people who cannot afford to use cafés as a customer. This is a situation where it may be helpful for people to have a card or letter confirming their medical need for rapid toilet access to non-public toilet provision.

In providing public toilets within the city the needs of residents who are likely to require public toilets closer to where they spend their time, shopping and walking, everyday have to be balanced against the needs of visitors to the city who are more likely to spend their time in the tourist attractions, cafés, restaurants and shopping areas where customer toilets will be available.

To assist in the planning of key toilet locations it would be helpful to review recommended levels of toilet provision for different areas such as residential areas and tourist areas. Alternatively comparisons could be made with other similar local authorities. In addition there may be measures of the impact of any reduction in the number of public toilets which have already been closed across the city.

## **Conclusion**

The main public health impacts of inadequate public toilet provision on the population are more likely to be those associated with social factors than they are the direct consequence of street urination and fouling.

In planning toilets for local residents the availability of public toilets in residential areas as well as in shopping and tourist areas should be taken into account.

For both visitors and residents alike well signposted easily accessible toilets with adequate capacity, distributed at appropriate distances across the city are essential.

Peter Wilkinson  
Consultant in Public Health  
13<sup>th</sup> December 2012.

## 5.B ePetition details

### Public Toilets for the City

- [View ePetition responses](#)
- [Browse all current ePetitions](#)

**We the undersigned petition the council to initiate a programme of increasing the number of Council-run public toilets, with attendants, around the City of Brighton & Hove, especially within the recognised leisure and shopping areas.**

Councils up and down the country have steadily reduced the number of public toilets over many years. This may reduce council costs, but it carries negative human and economic consequences.

The absence of public toilet facilities may be increasing the incidence of public fouling of footpaths and front entrances to homes and shops - especially in areas servicing the night time economy.

The lack of public toilets can prevent people taking children, the disabled and elderly for outings to areas (like parts of the seafront) where there are no public toilet facilities. And many fail to drink enough fluids when going out for fear of needing a non-existent public lavatory. In summer especially, this can result in dangerous levels of dehydration.

Pregnant women and the incontinent need easy access to public toilets if they are to be free to access leisure and shopping facilities in peace. The police on the beat, workmen, street cleaners, etc. and carers making their rounds of calls also need public toilet access as they walk about.

Writing in the Daily Mail, incontinence specialist Karen Logan informs that The British Toilet Association says 40% have been closed in the past ten years alone. She also warns that the bladder is directly controlled by the central nervous system "...and the physiological response to the need to empty it can mean "the heart rate starts to rise". Fine if one is fit, but for the "frail and elderly" with "high blood pressure or a cardiac condition, it can put you through a period of high blood pressure which could worsen your condition, or even, rarely, trigger a heart attack". She fears for those with irritable bowel syndrome and "the one in five over 40 who suffer with an over-active bladder".

The article is available online here:

<http://www.dailymail.co.uk/health/article-2097420/Its-inconvenience-The-lack-public-loos-bad-health.html>

Going to the shops, the beach or the parks should not involve this distress. The disabled in wheelchairs need street-level, flat-access public toilets and these are few and far between and this is unacceptable.

The economic prosperity of a shopping area can only be enhanced when public toilets are available that mean people can spend longer in that area without having to rush away to find a loo.

The presence of attendants is a community safety issue that also means more hygienic public toilets with constant provision of soap and toilet paper. Their presence also ensures users have a safe environment free from drug taking and other anti-social activities.

Easy public access to hand-washing facilities in public toilets helps control infection and helps reduce transmission of virus and bacterial sources of contagious infection within the public realm. People cannot feasibly be encouraged to practice frequent hand washing without easily available facilities.

The petition will be referred to the appropriate Committee meeting in October.

Started by: ValeriePaynter saveHOVE (SaveHove)

This ePetition ran from 20/02/2012 to 30/11/2012 and has now finished.

85 people signed this ePetition.

### **Council response**

Response provided by the Chair of the Environment & Sustainability Committee at the meeting of 28 November 2012:

"Thank you for your petition regarding public toilet provision which has been presented at Full Council and referred to this committee.

I share your view regarding the importance of public toilet provision. The council is recognised for its good performance as reflected in our Loo of The Year Competition results where we consistently head the national league table, as well as results from customer satisfaction surveys.

However we do need to consider future service provision, particularly given the financial constraints the council faces which is one of the reasons why I have requested a scrutiny on this service. I am pleased to say this is now being conducted by the Overview and Scrutiny Panel and the first meeting of the Panel took place on Monday to consider the scope of the exercise. The panel will focus on future provision of this service and consider:

- Whether current provision is adequate and cost effective
- How the service can be best provided in future given the resource constraints and
- Whether there are better ways to provide access to toilets for all user groups.

The panel is aiming to complete its work by April of next year and I very much look forward to its findings to help inform decisions about this very important service in the city.

I would like to recommend that your petition is brought to the attention of the Overview and Scrutiny Panel".

## Written Evidence

### 5.c Talk given to the Older People's Council in 2008 from the NACC and resubmitted to this scrutiny panel as evidence.

I am here today to talk to you about the provision of public toilets in Brighton and Hove.

This is a particular hobby-horse of mine, as some of you may know if you read my letter in the Argus or heard me on the local radio. As you know, there are 3 of us speaking here today who are all members of NACC (National Association of Crohn's and Colitis), and each of our talks has particular relevance to the subject of public toilets, because of the nature of the illnesses that we suffer from. So, while finding a public toilet may be important to older people in general, to people with colitis and Crohn's, at any age, it can very often be a matter of extreme urgency.

Let's look at where we are in Brighton and Hove.

According to Brighton Council's web-site, there are 75 public toilets, but they are not all "public" toilets – some are simply toilets provided in public areas.

- 14 are in Libraries and Museums

- 9 are in superstores or supermarkets, etcetera

  - These are in a scheme called "You're Welcome"

- 6 are automatic toilets

- 46 are actual "public" toilets

So that is 75 in total.

- 56 of these toilets have Baby Changing Facilities

- 9 have Children's Facilities.

- 2 have an Adult Changing Bench, which can be very useful for adults who are taken ill, or who have to change their clothes or their appliances.

- 2 have a Nursing Room.

Opening hours vary widely, and these depend on the season for public toilets, and on business hours for stores, museums, and libraries.

14 of the public toilets are attended toilets, and this again depends upon the season.

Most public toilets are cleaned and maintained by a company called Wettons, and, due to their efforts, Brighton & Hove secured Second Place in the 2007 Awards for "Loo of The Year" – in the category known as the 'Premier League', which is for Local Authority Public Toilets. This is one position higher than in 2006.

In 2007, Brighton & Hove did better than ever before, winning a total of 27 awards, 1 five star award, 17 four star awards and 9 three star awards. Brighton and Hove were also awarded 10 Attendant Team awards, and a Top Ten Award for Family Friendly Facilities at Western Esplanade, Hove

Brighton also has **automatic public toilets** – these are unisex facilities and are automatically cleaned and disinfected after use. They can be used by either a 20 pence coin or a RADAR key. They have a space for changing babies and disposing of nappies, and RADAR accessible facilities for people with disabilities.

All units are fitted with safety features to make sure that users are able to exit should the unit become vandalised or damaged. They all have signs advising how to operate the door opening/closing procedure.

When a fault occurs, it is transmitted to the contractor's office via a modem to ensure their engineer can react promptly. The cleaning and maintenance of the automatic public toilets is carried out on behalf of the Council by Healthmatic Limited.

There are at least 42 **RADAR accessible toilets** in central Brighton and Hove, and more in the outer areas. You can find their locations on the RADAR web-site – more about web-sites later. If a person is entitled to a RADAR key, a simple form is available and all that is required is a G.P.'s signature.

Due to continued misuse of RADAR accessible toilets, these toilets are now being double-locked after 8pm in the winter months, and after 10pm during the summer. This is a considerable disadvantage to those who properly need to use them.

RADAR toilets within libraries are to be fitted with a key-pad number lock, and anyone wanting to use them must contact a member of staff for the number. The key-pad number will be changed from time to time.

As well as the automatic toilets, 20p is charged for using the public toilets on Brighton seafront, and in the Station – make sure that you have plenty of 20-pence coins.

So much for the bare facts.

These toilets may, or may not, be in the most appropriate places, after all, you may not want one at the corner of your street, but you will want to see one when you need it.

But there is a major obstacle – finding them when you are out and about.

Until a couple of years ago, Brighton Council used to issue a “Where To Go” map – [SHOW MAP] This was readily available to residents and visitors at tourist offices, tourist spots, the Town Hall and other public places. It shows a street map of central Brighton, and the location of each toilet is shown with a numbered dot.

[TURN IT OVER – OPEN IT OUT]

On the reverse, those numbered dots are translated in to locations, opening times, a list of facilities, etc.

I still find this very useful, and I am holding on to this last copy, because I can't get another one.

There is a City Map for tourists

[HOLD UP THE CITY MAP]

On the map, the public and disabled toilets are shown, but there are 2 problems here:

- 1 The symbols for toilets are fighting attention with all the other symbols in the map, and
- 2 It isn't explained that where there is a symbol for Accessible toilets, other toilets are also on the same site.

When I recently asked at Hove Town Hall for the latest map to use for a project, I was politely told that it is no longer printed. If I want the list, I was advised to go on-line to the Council's web-site, and all the information would be there.

This raises the first problem – not everyone has a computer and internet access. What are they supposed to do? Aside from suggesting internet cafes or using the computers in the library, I couldn't get a satisfactory answer to that one.

The second problem is that the information on the web-site is in the form of a downloadable Word document that is too wide to be printed on a normal A4 sheet.

So, printed out, the list of toilets is 8 pages long. And it has a key code in colour, so you will need a colour printer.

Not very handy at all, especially if you want to take it out with you for a shopping trip around town. **AND** on this document, there is **no** map showing pictorially where each toilet actually is located, so you have to work out the distance from where you are to the nearest toilet by guesswork.

Another problem for me, and anyone else who still has a copy of the old map, is that the location numbers in the web document don't always match the numbers on the old map. Presumably, this is because of closures and new openings.

So it's best to take a philosophical view and hope that the facilities you need are there when you arrive.

When you do arrive at a public toilet, you may find a map on the wall like this one.

[  
The detail on this map is so poor as to be virtually useless – AND, even if it was readable, you can't take it off the wall and put it in your pocket.

A couple of months ago, a Government Minister suggested that all public toilets should be closed and that shops, pubs, public buildings, etcetera, should all be paid to open their toilets for general public use.

Aside from being a short-sighted attempt to save money, I personally can't see this working to the public's advantage. Anyone who has been on the sharp end of a barman's tongue for daring to use the toilet without buying a drink would think twice before entering; and what about

- A children in pubs,
- B the facilities needed for the disabled,
- C using these toilets out of business hours.

It just seems to be badly-thought out and not very practical.  
I hope that we never go down that route.

## 5.D Written submission for the scrutiny panel on publicly accessible toilets

I understand that you are collecting comments for a Scrutiny panel regarding the access of public toilets in Brighton & Hove (B&H).

I have been a resident of B&H for the past 7 years. In that time I have noticed the decline of public toilets within B&H, especially along the sea front and main shopping areas.

I have a long term condition called Crohn's disease which necessitate my using public toilets quite urgently, especially if I have an attack. When I first came to B&H I used an extremely useful pamphlet issued by the Council called "Where to go Guide". But it is no longer available in paper form and now only available on line, it is useful, if you have access to a computer and it is 48 pages long.

I belong to several groups, and a while ago three of us gave a presentation to the Older People's Council, which I think they found useful. I still have my report on file if you wish to see it

But since then, some of the Public toilets have been closed, i.e. Hove recreational ground, and one near Hove Cemetery.

With regard to shops, I have used the toilet in BHS but over the last few weeks, they have put a keypad on the door, and you have the number on a receipt. I went to see a manager there, and explained that I was from a local group, and explained that our members needed to use their facilities if they are in the shop, but now you had to buy something to get the number. His reply was "you don't have to buy anything, but ask an assistant for the code". To be honest if we all did this, it would be too late, and accidents happen, which is really degrading. The reason he gave for the closure was it was being vandalised. In all the years I have gone there, I found it okay, never vandalised. He did say and it was on the door, that the nearest public toilet was upstairs near the car park.

I wonder if it is at all possible for those companies/shops, pubs and restaurants who wish to participate in a scheme where a card sign could be put on the entrance saying "Can't wait card" accepted. Our group does issue a "Can't Wait" card as do several other charities and self-help groups.

**Submission from a member of the IBD (Inflammatory Bowel Disease) Panel - Royal Sussex University Hospital and the Crohn's and Colitis UK Brighton & West Sussex Membership Secretary.**

## 5. E. Written submission from a resident

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## 5. F. Contributions on Public Toilets – Compiled by Brighton and Hove LINK



### Background Information

- According to NHS figures there are approximately 3 and 6 million people in the UK with some degree of urinary incontinence
- The LINK has received 80 negative comments about toilets; 57 about limited opening times
- Sixteen per cent of the city's population has a disability, higher than the national average, which is 11%.
- Currently valued at over £407m, the Tourism Economy has to grow in real terms to help the City and its residents benefit. The availability of public toilets ranked second from last in a recent survey of visitors; however this is not mentioned in the City's Tourism Strategy
- *Survey of visitors Brighton and Hove Visitors by VisitBrighton*  
Quality of visitor attractions 7.96; Quality of places to eat and drink 8.16; Quality of shopping 8.23; Ease of finding way around 8.24; Ease of getting here 8.20; Ease of parking 5.85; Availability of public toilets 6.27; Cleanliness of streets 7.11; Upkeep of parks & open spaces 7.96; Quality of beach 7.78; Choice of nightlife 8.17; Overall impression of city and welcome 8.33; Overall enjoyment of visit 8.50; Likelihood of recommending to others 8.70; Likelihood of returning 8.56.

### Problems for older people:

Help the Aged in their publication 'Nowhere to Go: Public toilet provision in the UK' (Help the Aged 2007) conducted a survey involving over a thousand users on the public's opinion on public toilets in the UK, they found:

- 78% of respondents identified short opening hours as a factor prohibiting them from using public toilets.
- 80% of respondents do not find it easy to find a public toilet.
- 74% of respondents are frequently disturbed by the lack of cleanliness of their local public toilets.
- 79% of respondents find that safety concerns make public toilets unappealing
- 52% of respondents agree that the lack of public toilets in their area stops them from going out as often as they would like (Help the Aged 2007) this can mean they are more likely to become isolated and depressed.

### Younger People:

Research has also found that the provision of toilets would encourage 94 per cent of 16–19 year olds to use urban green spaces more frequently. Similarly, access to toilets would encourage 87 per cent of disabled people to use green spaces more, and 81 per cent of 56–65 year olds to do so. Improving Urban Parks, Play Areas and Green Spaces, Department of Transport, Local Government & the Regions (2002)

### National best practise:

The London Assembly Health and Public Services Committee conducted a review into public toilets in London in March 2006 (Swindon Borough Council 2007). The attributes of a good public toilet were identified as:

- Open - if it's not open it's no use
- Clean – especially clean porcelain. Dry floors are a priority for wheelchair users
- Safe – good lighting, a location that feels safe and busy and no visible signs of anti-social behaviour. An attendant, up to date cleaners' 'tick-sheets' or CCTV can also give reassurance that someone is 'keeping an eye out'. The 'vandal-proof' stainless steel appearance of some automatic toilets are sometime viewed as a good response to vandalism but sometimes as 'giving in' to antisocial behaviour

- Well stocked – with toilet paper, soap, water, and towels for reasons of public health and hygiene but also to show the toilets are looked after.

Other important factors included:

- Location including demand for the service, duplication of facilities, proximity to bars and clubs to reduce street fouling
- The more toilets the better but they should be of a usable standard
- The service provider, i.e. local authority, shopping centre or managed by a private company does not matter to the service user
- 24 hour provision depending on need and toilets should be designed to deter vandalism and antisocial behaviour
- Many people would be willing to pay to use a toilet of a higher standard but this may deter other service users, resulting in maintenance costs not being met
- Actively seeking regular feedback from service users is vital
- Considering what additional facilities are required. Wolverhampton City Council opened new public toilets including a quiet area for parents, showers, access to the Council's website, a free telephone line to the Council's call centre, a multi-media screen displaying Council information and CCTV

#### **What the LINK has done on public toilets:**

- Signed up to the Where Can I Go? Campaign (British Toilet Association): [www.britloos.co.uk](http://www.britloos.co.uk)
- Poll on members of the public – collected 80 views on public toilets.
- Suggested a prize draw for Your Welcome participants (e.g. Dyson Blade hand dryer) and to investigate the Council providing its own Can't Wait Cards (The idea is that you can discretely hand over the card. It explains that the holder has a medical condition that requires the urgent use of a toilet)
- Asked questions to Brighton and Hove City Council
- Set up city-wide toilet group and held 7 meetings

#### **Comments from the Public/Community Groups**

Each paragraph below is from a separate individual or group (the only edits made are to protect the identity of the individual who raised it):

There are not enough toilets especially in the summer for a seaside tourist town, needs to be more along the seafront and they need to be kept in better condition - those ones near the Palace pier are an absolute health hazard. Can't even think of any in town, I would always pop into a pub if in need but not sure disabled/children/mums with buggies could do that.

Need some u can get in with a buggy...Not sure what u are supposed to do, piss with door open, leave buggy outside with baby and hope nobody nicks ya baby, take sleeping baby from pram and carry into toilet screaming while you pee with your bag etc or just hold those weak pelvic floor muscles til u get back home.. rant over lol

My hate is always lack of soap... Especially when the loos always seem that bit grubbier. Maybe hand sanitizers could be available on walls, maybe stop the amount of water on floors wet floors drive me mad!!

The ones on the seafront are well maintained, and there are enough of them (approx 1 mile between each other). I think The opening hours are good, as whenever I have been for a run early they are open, and they stay open pretty late if we are ever having a BBQ!

I think where they are lacking is probably actually knowing where they are on the seafront as the one between the two piers is quite easily missed, as is the one by Dukes mound. I understand the 20p charge for these too.

In terms of public toilets in the rest of town, I can honestly say I wouldn't even know where they are. I know most of the parks have them, although not sure of the state/ access. If I need the toilet in town, or away from the seafront all I can think of it a cafe, or Churchill square. Cafes can sometimes insist on you buying something, which is a bit of a pain.

Although I don't have any kiddies, I would say the baby changing facilities in the toilets I know of are either lacking, or not the nicest, in terms of cleanliness, or young person friendly. There are main toilets on Theme parks etc that now have smaller kiddy toilets, with different size toilet seats depending upon the age of the child. I think they may have this option at the toilet in the park up by Yellowwave, but they are pretty dirty!!

Disabled access/ facilities I would say also really needs to be reviewed.

Lack of accessible public toilets that are open (particularly London Road and Kemp Town). Particularly important for pregnant women or those with a continence issue or catheter user. Have a radar key but not enough toilets available to use the key.

As someone who has sometimes suffered from a digestive disorder, I know every one of the few public loos in town and at times have had to calculate the time it would take to get to the next one!

No Toilets between Open Market to Churchill Square.

Lack of toilets along B&H seafront.

To be fair to BHCC/Cityclean they did call me back very quickly following my complaint about toilet cleanliness and said that they would send someone out to clean up.

I just want to say that I am really glad that there are some. I use them regularly and would often be very uncomfortable if they were not available, especially the one in Hove in Sackville Road and the one in Portslade, near the Station plus any on the sea front. The one in the car park by the broken pier is horrible. Some of us might not even be able to go out for any length of time without public toilets, unless we go to Churchill Square, and we might actually not always want to go there.

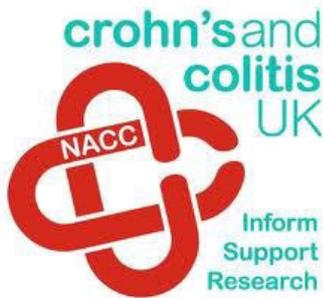
Brighton & Hove has seen the closure of a huge number of public toilets during the last 20 years - as I understand it, more than half have closed. This has reduced access to such conveniences by huge numbers of vulnerable people, including the elderly, the incontinent, people with limited mobility and parents with young children, not to mention the homeless. Access to toilets increasingly involves a long walk, spending money in pubs or cafes or staying at home - causing greater levels of isolation for some, or expense and stress for others. In recent years, toilets in public parks have become vulnerable to cut backs and this has raised concern by park users and friends of parks groups. Last year's threat to close toilets in Saunders Park caused shock and outrage and the friends groups got together a petition with huge support. Other parks may have less organised users, but I suspect the outrage would be equally felt. Closure of such toilets threatens to reduce the attractiveness and accessibility of parks to many users, while others will resort to defecating and urinating in flowerbeds as a reasonable option, raising additional concerns for park users. Parks and playgrounds are excellent 'free' resources which, across the city, help to strengthen communities and support better health outcomes and mutual aid and which are equally accessible, irrespective of wealth or income. The withdrawal of toilets from parks undermines such equality of access and threatens to deepen social divisions and alienation with profound negative long term consequences for the health and wellbeing of all. Toilets in parks may be expensive to maintain, but this should be seen as an investment in the wider social and health benefits. It is vital that the value of public toilets in parks is recognised in

this context and their continued provision protected. There may be opportunities to manage such facilities differently and less expensively and the City Council should be actively explore such options while ensuring that closures are avoided. Investment in cafes in parks, to help management of toilets, is one welcome approach and where this happens, such cafes should be fully acknowledged for the service and cost savings that they enable and generous rents should be set accordingly. There may be innovative approaches in other parts of the country, and the world, which could be explored and applied in B&H, if appropriate. I'd like to suggest that as part of this strategy, some research is conducted to draw out other innovative options for managing toilets, including potential partnership approaches with the private, voluntary and community sectors.

The public toilets beside London Road's Open Market (currently in the process of being re-developed) really need to be re-vamped as well. These toilets, although a little dated, used to be immaculate and had a cleaner in attendance most of the time (there is still a little room in the women's toilets for him/her). The last time I tried to use them I almost threw up and my child just walked out, as one cubicle and toilet were covered in excrement which had then also been tramped through the general entrance. It's possible that there are already plans to sort the toilets in line with the improvements to the Open Market, but thought I would mention it just in case. Also, there are currently men's and women's toilets, but no toilet with wheelchair access as far as I am aware. These are the only public toilets in the London Road area, which is a really busy shopping area – the only other toilets available nearby are in Sainsbury's.

There is no toilet available at Hollingdean park at weekends, which is when it is of course the most used, both by local residents and as well by the many young people using the skate park. Some resort to urinating and defecating in the nearby bushes. There is no alternative toilets for at least a few miles (blakers park I believe). Also, now with the park being one of the 'gateways to the national park', there is even more of a need for a toilet. Such a facility would hopefully also provide a source of water for the skate park users.

As a woman who has been pregnant I can assure you public toilets are essential. also the decline in them over the past two decades because of financial pressures and vandalism/misuse and potential attacks on young people are real concerns but I don't think getting rid of them is the answer. Also, it affects a number of catering businesses and cafe's who need to be within 100 meters of a public toilet, if not possessing their own in order to operate. I think spending a penny or 20 is acceptable if this genuinely helps maintain them. In our park ( Hollingdean) which has an orchard attached we were dearly hoping to have an integrated compost toilet and be able to use the Humanure as fertile soil once the process is complete. Now, I think we would at this point, just settle for a toilet that is open and available to people out of hours.



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## 5. G. Proposed cuts to public toilet provision in Brighton and Hove - a response from Crohn's and Colitis UK

### Summary

Cuts to the public toilet provision in Brighton and Hove - proposed in the draft budget - will further reduce an already threadbare service.

Public toilet closures impact on the lives of people who have bowel, bladder or menstrual problems, often increasing social isolation and preventing participation in everyday activities.

Decision-makers must take careful consideration of the role of public toilets and the impact of any cuts on vulnerable groups of people. This is an issue of equality.

In this document, we consider the impact of closures on people living with Crohn's and Colitis. We have used information provided by Crohn's and Colitis UK and a local survey.

### Introduction

Our group - Crohn's and Colitis UK, Brighton and West Sussex - learned from reports in the Argus that the Green party administration's draft budget for 2012 would include the closure of some public toilets in the city and restricted opening hours for others. These reports alarmed many of our members, some of whom contacted us.

Subsequently, we received confirmation of these cuts from Jo Jones at the council. Last week (10 January), we received a response from Cllr Pete West outlining plans that are hoped to alleviate the impact of some of the cuts.

Our group has been active over the past few years in attempting to protect public toilet provision in the city, working alongside Brighton and Hove LINK, the Federation of Disabled People and the Older People's Council.

In this work we have received the support and encouragement of several Green councillors, especially Sven Rufus. Caroline Lucas MP has also been very supportive and helpful in our attempts to prevent Southern Railways introducing trains without toilets.

Indeed, the party's stance on public toilets is stated very clearly on page 14 of the 2011 election manifesto, 'A fresh start for a fair city'.

*Greens will... [s]top the sell off of all public toilets in the city and look at ways of bringing closed facilities back into use, like those in Upper Rock Gardens.*

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## About Crohn's and Colitis

Approximately 250,000 people (1 in 250) in the United Kingdom are affected by Inflammatory Bowel Disease (IBD), the main forms of which are Crohn's disease and Ulcerative Colitis.

A recent national audit showed that over 2,000 people with IBD are treated by the Brighton and Sussex University Hospitals NHS Trust. Many more people with IBD living in the city are treated exclusively in Primary Care or are patients at other hospitals.

Crohn's disease and Ulcerative Colitis are conditions which impact on every single aspect of daily living. When active, the diseases cause the intestines become swollen, inflamed and ulcerated. These are fluctuating conditions, and flare ups can often occur suddenly with little or no warning.

Debilitating symptoms, such as frequent diarrhoea, acute abdominal pain, tenesmus (constant urge to have a bowel movement), weight loss, and overwhelming fatigue, are accompanied by a perpetual anxiety about suddenly needing the toilet and having very little time to find one. Outings, therefore, have to be meticulously planned to take into account the availability and location of publicly-accessible toilets.

Experiencing an episode of incontinence in public is each person's worst nightmare. For many individuals, the result is a devastating impact on their ability to engage in activities away from the home such as going to work, shopping and socialising.

Various coping strategies are often used by people with IBD to avoid having an "accident". Some people avoid eating or drinking prior to leaving their home. Others avoid placing themselves in a situation where they may be without immediate access to the toilet, confining themselves to their homes instead and leaving many feeling isolated.

In 2007, a Crohn's and Colitis UK survey of 974 young people with IBD revealed the extent to which isolation can arise from the need to be continuously within easy reach of a toilet. 43% of respondents reported feeling seriously isolated at the time of their diagnosis.

When asked for general comments about the impact their condition had on them, 246 respondents stated that their IBD made socialising almost impossible, with 183 attributing this to "always needing to know the proximity of a toilet."

Adequate provision of publicly-accessible toilets is therefore essential in ensuring that people with Crohn's disease and Ulcerative Colitis are able to leave their homes and retain some sort of normal life within the constraints of their illness.

## Provision of Publicly-Accessible Toilets Parliamentary Report

In 2007 a report of the Communities and Local Government Select Committee outlined proposals to increase the provision, accessibility and quality of publicly-accessible toilet in the UK.

The full report, including written and verbal evidence given to the Select Committee, is available at:

<http://www.publications.parliament.uk/pa/cm200708/cmselect/cmcomloc/636/63602.htm>

In the report, the Committee made a number of recommendations to encourage local authorities to provide adequate facilities in their respective areas.

The Committee called on local authorities to:

*"recognise the value of public toilets and find ways to include the provision of public toilets in the duty to support their local community, through, for example, Community Strategies, Local Development Frameworks, Local Area Agreements and Business Improvement Districts."*

Further proposals were made in the report which outlined how this might be achieved without causing additional expense to the public purse. For example, it was recommended that local authorities increase their use of positive letting policies to ensure a greater number of toilet facilities are available for the general public.

Recommendation 23 of the report also urged local authorities to consider placing the provision of public toilets within one or more of the six National Indicators that link the provision of public toilets.

Additional proposals were made by the Select Committee which recommended that local authorities consult with their local community if they plan to close toilet facilities, and demonstrate the case for closure. It is essential that those groups with a particular interest in the provision of toilet facilities, such as people with IBD, have their views considered.

To increase the number of adequate publicly-accessible toilets in their local areas, some local authorities, including Brighton and Hove, have introduced Community Toilet Schemes. These scheme enables local businesses - such as pubs, restaurants and shops - to work with the local authority to provide clean, safe and accessible toilets to the public.

Such schemes are not without their shortfalls; some people are uncomfortable about asking to use the toilet facilities. In addition, toilets designed for customers are rarely sufficient for people dealing with health problems - especially a lengthy clean-up after an accident - and the noise and resulting smell of an urgent trip to the loo may not be welcome.

Restrictive business opening hours also mean that round-the-clock access, as required by many people with health conditions such as IBD, is not possible under the Community Toilet Scheme. As a result, access to facilities in commercial premises remains only a partial solution and should be a supplementary measure rather than the basis for provision.

## Can't Wait Card

Crohn's and Colitis UK have taken action to assist people with IBD in gaining quick access to toilet facilities where public toilets are not provided or accessible. Members are issued with a "Can't Wait Card" which has the message:

*"Please help - our member has a medical condition which means they need to use your toilet facilities urgently. Your kindness and cooperation would be much appreciated."*

The purpose of the card is to make it easier for members to ask to use toilets in shops and offices, without having to provide a long explanation about their condition. Nevertheless, the card does not guarantee access and we hear from members who have been very distressed when access to toilet facilities has been refused.

## National Key Scheme

Similarly, many individuals with Crohn's and Colitis carry RADAR keys as part of a National Key Scheme to allow independent access to disabled people approximately 7,000 locked public toilets across the UK. However, concern has been expressed about toilet closures which have undermined confidence in the scheme.

In Brighton and Hove, RADAR toilets are now routinely double-locked - and therefore not accessible - outside of public toilet opening hours. In winter, this may be as early as 3pm. We first raised our concerns with the council in 2007. As yet, this issue is unresolved.

## The impact of public toilet closures

It remains apparent that there is no sufficient substitute for the provision of adequate public toilet provision. Yet the number of public conveniences has halved in the last decade from 10,000 to 5,000 and current economic restrictions have seen a steep incline in the rate of public toilet closures.

If the proposed cuts go ahead, the number of public toilets in Brighton and Hove will have been reduced by almost 30% in a decade. In 2002 there were 53 public toilets, with a reduction to 38 under the budget proposals.

Crohn's and Colitis UK regularly receives correspondence from members and the public, concerned that they will not be able to visit their local shops or meet with friends because their local services have closed. The consequence of these closures is that people with health conditions such as IBD, along with disabled people and the elderly, have to limit the amount of time they spend away from their homes.

The impact of these restrictions on the individual should not be underestimated. Not only does the closure of public toilets lead to isolation for many people who are afraid to leave their homes for fear of experiencing an episode of incontinence, it also undermines other initiatives to improve participation in normal daily life.

For example, efforts to increase the number of disabled people in employment will have a limited impact if individuals face barriers even getting to and from work because they do not have guaranteed access to a toilet. This is particularly true of people with IBD, and other fluctuating health conditions, who may experience the onset of a flare up very suddenly, often resulting in the individual requiring immediate access to toilet facilities.

Similar limits exist regarding a person's capability to manage their condition if a lack of public conveniences prohibits them from visiting the shops to purchase food or collect their prescriptions.

Crohn's and Colitis UK urge local authorities to continue to provide adequate public toilet facilities for the local community.

We encourage decision-makers to give ample consideration to the needs of people with IBD, alongside others with health conditions and disabilities, and the elderly, before taking any decision to close public conveniences.

We ask that due thought is given to the consequences of toilet closures on those that rely on the facilities to maintain participation in daily life.

# The proposed cuts in Brighton and Hove

These are the sites which have been suggested for either closure or reduced opening or attendance:

## Nine closures:

- Black Rock (currently summer only)
- Lower Promenade at West Pier (currently summer only)
- Saunders Park
- Aldrington Recreation Ground, Wish Road
- Hove Cemetery North
- Hove Recreation Ground
- Nevill Playing Fields (part time)
- Vale Park
- Victoria Recreation

## Six reduced hours/attendance:

- Open Market - change to attend summer only but remain open
- Goldstone Villas - change to attend summer only but remain open
- King Alfred - change to unattended all year and remain open
- Kings Esplanade - change to unattended all year and remain open
- The Lanes - change to open & attend weekends and bank holidays only - alternative facilities available in Bartholomew House during the week.
- Norton Road - change to open & attend weekends and bank holidays only - alternative facilities available in Hove Town Hall during the week.

The proposals are aimed at saving £163,000 from the Cityclean budget and if agreed would come into effect in 2012/13.

In addition, Pete West sent us more information to consider:

*I have looked at our portfolio of loos and considered changes on basis of usage level, disabled accessibility, and proximity to reasonable alternatives. We are altering the hours of some, and attendance levels, but some are also down to close.*

*With some of these we are trying to find additional sources of income or alternative replacement provision. At Wish Park for example which has two sets of loos, one set is to close, but a new café planned will have provision of publicly accessible loos in its lease.*

*In the case of the Open Market the crummy loos there will be pulled down and new publicly accessible loos will be provided by the new market, meanwhile we will provide a portacabin. We have also won £2.2m from the lottery to revamp the Level and new loos including an adult changing facility are will now be possible.*

*I know having to use toilets in businesses is not the same as a proper public loo, but I am determined that business should be playing a bigger part. On the continent there is an open door policy without asking and I don't see why our hospitality industry can't do the same. We intend to relaunch You're Welcome as Use Our Loo, but I need help getting business to say yes.*

## Local responses to the proposed cuts

The Crohn's and Colitis UK Brighton and West Sussex group have received feedback from members, including via an online survey posted between Monday 9 and Friday 13 January.

The main themes of many of the feedback are summed up well by this email from Sarah, who lives in Hove:

*I have lived here nearly 20 years, I have watched the public loos close down, the radar loos get locked at night, it is not fun.*

*In the summer, I cannot enjoy the seafront after 6-8pm as the loo's close down, it would be so nice to take a picnic to the seafront but that joy is taken away as eating makes me need the loo. Walking the dog can be a nightmare, especially in winter as the loo's shut before I leave work.*

*I am interested in how much mess the council workers might have to clean up. I am ashamed to say that I have sometimes had to go in a bush or behind a beach hut as you go to find a loo closed, and I do not have time to find another, so just have to go wherever I can.*

The online survey was completed by 29 people over a five day period. 28 confirmed they lived or worked in Brighton and Hove (or visit the city) and also have Crohn's or Colitis. A detailed summary of the results is included below.

### **Q. Why do you need public toilets in Brighton & Hove?**

Whilst shopping 100.0% (29)

I need to know they are there - just in case 96.6% (28)

When going out in town 96.6% (28)

When visiting the beach 96.6% (28)

When travelling around by bus 75.9% (22)

To clean up if I have an 'accident' and don't get the loo in time 65.5% (19)

When travelling around by car or motorbike 62.1% (18)

When on the way home from work, school or college 55.2% (16)

When on the way to work, school or college 51.7% (15)

Whilst exercising or playing sport in the park 48.3% (14)

When travelling around by bicycle 27.6% (8)

When out with the kids 24.1% (7)

Whilst working 24.1% (7)

When visiting Brighton & Hove from elsewhere 24.1% (7)

When walking the dog 17.2% (5)

One respondent explained:

*I need the public lavatories kept open to enable me to go out at all. My quality of life would really plummet. I often need to 'go' with very little warning more than 4 times an hour.*

The responses to this question certainly seem to confirm that people with Crohn's and Colitis require public-accessible toilets whilst participating in most daily activities, including whilst travelling. Toilets adjacent to public transport is flagged up by 75.9% of respondents. Nearly two thirds use public toilets to clean up after faecal incontinence.

## Q. Where do you need public toilets in Brighton & Hove?

On the seafront 100.0% (28)  
In shopping areas 92.9% (26)  
In the city centre 89.3% (25)  
In parks 85.7% (24)  
Near bus routes 78.6% (22)  
In open spaces 64.3% (18)  
Near car parks 64.3% (18)  
On the outskirts of town 53.6% (15)

One respondent added: *Wherever I happen to be is wherever I may need them and this could be anywhere.*

Responses to this question suggest that people with Crohn's and Colitis need publicly-accessible toilets in all parts of the city. Again, the need for toilets on bus routes is identified.

## Q. When do you need public toilets in Brighton & Hove?

Early morning 6am-8am 35.7% (10)  
Morning 8am-midday 96.4% (27)  
Afternoon midday-4pm 89.3% (25)  
Late afternoon 4pm-6pm 85.7% (24)  
Evening 6pm-9pm 75.0% (21)  
Late evening 9pm-midnight 46.4% (13)  
Night time midnight-6am 7.1% (2)

The survey asked for more detail to be given about the need for public toilets in the 4pm to 8am time period. This is a selection of the responses:

*If I go running before or after work I get diarrhoea and need a toilet urgently. This is usually on the seafront or near a park. I find it very distressing if the loos have been locked up too early or not yet opened.*

*Meeting with friends, you may go once but then a little later body wants to go again, and fast*

*Educational and Voluntary Training courses that end after 4pm. Also if out with friends, taking visitors about Brighton & Hove*

*I finish work anywhere in between 5-7pm, I then walk the dog and have a need for the loos at this time. Also, in the summer, it is nice to be able to walk on the beach at the same times*

*On a night out*

*If I am out in the evening, socialising, attending an evening class*

*Anytime - that is Crohn's!*

More respondents indicated that they needed publicly-accessible toilets whilst out in town during the evening. This is an activity many people take for granted, without worrying about whether a toilet can be found at very short notice.

## **Q. What do you do when you're out and can't get to a loo?**

- Find a shop and ask to use their staff toilet 71.4% (20)
- Jump in the car and drive home as fast as possible 57.1% (16)
- Soil myself and go home to clean up 50.0% (14)
- Soil myself and clean up when I get to a loo 42.9% (12)
- I squat behind a bush, building or hedge 28.6% (8)
- Rather not say 17.9% (5)
- I rarely go out in case of an accident 10.7% (3)
- Knock on the nearest house door 3.6% (1)

Other responses included:

*Go to a pub, hotel, public building, doctors surgery, dentist etc to use their loo*

*I also tend to stay in areas where I know what toilets are available so less toilets means less me out and about doing what I and my children enjoy. Very restricting.*

*I have tried to use restaurant pubs, shops and cafe's toilets, even with my Crohn's and Colitis 'Can't Wait' Card - but mostly still get refused help. I have soiled myself trying to explain the urgency of why I need to use their toilet facilities. Public toilets are the safest, best and easiest option.*

## **Q. If you have ever had to 'go' in public, have you experienced any threatening behaviour or comments from other people?**

- Yes, I have had to 'go' in public and experienced threatening behaviour 0.0% (0)
- Yes, I have had to 'go' in public and experienced threatening comments 8.0% (2)
- I have had to 'go' in public, have received comments but never threatening ones 16.0% (4)
- I have had to 'go' in public but have never experienced any comments 32.0% (8)
- I have never had to 'go' in public 24.0% (6)
- I would rather not say 24.0% (6)

Two respondents added comments to this section:

*People get very upset that you wont 'wait' to go to the toilet if it is very noisy. They think it is rude to use public toilets and I have had comments like "Oh, did you have to do that" and "Is this really the place for that!" I normally answer that if I could wait until I got home, I would*

*I had an accident on a bus. The reaction of other passengers was frightening. It was only comments, but felt I had to get off the bus instead of continuing home. I have accidents on trains before. I can get to the loo there. I might of got looks, but no comments. Sometimes aggressive banging on the door if I'm in there a while.*

## **Q. Have you ever had an 'accident' out of the house when you couldn't get to the loo in time?**

- Yes 75.9% (22)
- No 17.2% (5)
- Rather not say 6.9% (2)

**Q. How do you feel when you think about having an 'accident' when you're out and not getting to the loo in time?**

Ashamed 72.4% (21)  
Tearful 69.0% (20)  
Sad 65.5% (19)  
Upset 65.5% (19)  
Worried 55.2% (16)  
Angry 55.2% (16)  
Fed up 55.2% (16)  
Alone 41.4% (12)  
Scared 41.4% (12)  
That's life with Crohn's and Colitis 37.9% (11)  
Don't want to go out anymore 34.5% (10)  
Why me? 34.5% (10)  
I've had enough 27.6% (8)  
It's just something I have to deal with 24.1% (7)  
It could be worse 10.3% (3)

Respondents also added:

*Embarrassed*

*Although I appreciate that this is a symptom of Crohn's, it is still no less embarrassing and is very stressful especially when out in the local Brighton and Hove area*

*Depressed*

This was a survey that many people found emotionally challenging to complete. The responses to the survey suggest that we cannot underestimate the importance to people with Crohn's and Colitis of publicly-accessible toilets.

Here are some final comments from those who completed the survey:

*Toilets are an essential part of everyone's life. It is not until you experience the degradation that accompanies 'an accident' in public that you suddenly realise how important it is to have easily accessible toilet facilities. Life can be difficult enough without the worry of whether or not you can 'make it to the loo' in time.*

*Public loos are a basic facility in a civilised society. Cafés, pubs and shops are not there to provide a public convenience. Public telephone boxes are disappearing because people have mobile phones now, but we do not have mobile loos. Where you get significant numbers of people in a public space, public loos are a basic amenity that people expect as part of their council tax.*

*Closing more toilets would be really bad news. It's a cut that I take really personally. How can people making the decisions not understand the impact on people like us? It's not very fair or caring, it's just mean.*

*Please don't close the toilets, we need them.*

The survey can viewed at: <http://www.surveymonkey.com/s/G2GNPH3>

## Conclusions and Recommendations

We hope that this document explains why publicly-accessible toilets are important to people with Crohn's and Colitis. Put simply, we need them in order to go about many basic activities that others might take for granted.

The service in Brighton and Hove is already threadbare. Closing any of the toilets listed - or significantly reducing opening hours - will take away a degree of autonomy for people with Crohn's and Colitis. There are already enough 'no-go' areas in the city.

People with Crohn's and Colitis sometimes describe themselves as disabled. The impact of the condition does often have a disabling impact on a sufferer's ability to carry out day to day activities. A sizable number of people with Crohn's and Colitis receive Disability Living Allowance (DLA).

However, there is more to disability than just impairment and symptoms. The way that society is organised can create or remove barriers. For people with Crohn's and Colitis, a lack of publicly-accessible toilets is one of the biggest barriers. We need more loos, not less.

So this is an issue of equality. A decision to cut the public toilet service is a conscious decision in favour of inequality and discrimination.

It is for councillors to decide how the council budget is spent. However, in line with the 2011 election Green party manifesto pledge, we would like to see the council

- **Protect all existing public toilets and look at ways of bringing closed facilities back into use.**

We believe that this should be done by choosing to postpone new projects, such as the food waste pilot scheme.

If any temporary closures are made, we feel it is essential that:

- **All sites remain intact and are able to be returned to full use**

We do concede that in the Lanes and at Norton Road the proposed arrangement is a sensible one in the current economic climate, but should only be temporary.

We would also like to recommend that the council:

- **Carries out a full public consultation to develop a strategy for an adequate and sustainable public toilet service, fit for the 21st century**

- **Engages local groups, like ours, to help develop the 'Use**



**our Loo' scheme Ensures that existing (and future) publicly-accessibly toilets are better signposted and advertised - using both traditional and electronic media**

- **Supports the British Toilet Association campaign to make public toilet provision a statutory duty of local authorities.**

Please do contact us if you require any

further information. Andy Player

Written on behalf of the Crohn's and Colitis UK, Brighton and West Sussex Group

14 January 2012