

APPENDIX 1



Proposal for a Public Space Protection Order for Dog Related Anti-social Behaviour (ASB)

Consultation questionnaire

Introduction

Southwark Council is committed to providing services that create a cleaner, greener, safer borough for all. As part of this commitment, Southwark Council would like to introduce a Public Space Protection Order to reduce dog related Anti-social behaviour (ASB) and encourage responsible dog ownership.

What is a Public Space Protection Order?

Public Space Protection Orders (PSPOs) were introduced under the Anti-Social Behaviour Crime and Policing Act 2014, giving provisions to deal with a particular nuisance or problem in a particular area that is detrimental to the local community's quality of life by imposing conditions on the use of that area that apply to everyone.

In order to reduce dog related ASB and encourage responsible dog ownership Southwark Council would like to introduce a PSPO to include the following:

- For those responsible for a dog(s) to pick up and dispose of any dog mess.
- To exclude dogs from children's play areas.
- To keep dogs on leads at all times within cemeteries and burial grounds.
- To put a dog on a lead when instructed to do so by an authorised officer
- To limit the number of dogs under the control of one owner within One Tree Hill site to four – replacing the current Dog Control Order provision.

The majority of dog owners and walkers in Southwark behave responsibly, but dog related anti-social behaviour is still a concern for Southwark residents and is one of the greatest sources of complaints from communities received by the Community Warden's Service. Residents have reported being attacked and frightened by 'packs of dogs', dogs knocking over children, disrupting funeral services and attacks on animals within Southwark's Cemeteries and parks and open spaces.

Dog mess is an unpleasant deposit which, if not picked up, can pose a health risk from Toxocariasis. This disease is caused by coming into contact with the dog mess of dogs that haven't been properly wormed. Symptoms of Toxocariasis can include fever, headaches, a cough and more rarely, seizures and blurred vision which can lead to blindness if not treated.

Southwark Council has no borough wide provision to issue fixed penalty notices specifically to those who do not pick up after their dogs. Introduction of a PSPO for dog related ASB will mean that officers can issue fixed penalty notices to dog owners who behave irresponsibly.

We would be grateful if you could fill in the questionnaire below to give us your view on the proposals detailed above and to make any further recommendations that might help us deal with dog related ASB within Southwark.

Questions

- 1) Do you support a borough-wide Public Space Protection Order to make it **a requirement for dog walkers to pick up after their dog/s?**
 - ☐ Agree strongly
 - ☐ Agree
 - ☐ Disagree
 - ☐ Disagree strongly

- 2) Do you support to proposal to **exclude dogs from children's play areas?**
 - ☐ Agree strongly
 - ☐ Agree
 - ☐ Disagree
 - ☐ Disagree strongly

- 3) Do you support the proposal for **dogs to be on leads within cemeteries and burial grounds** at all times
 - ☐ Agree strongly
 - ☐ Agree
 - ☐ Disagree
 - ☐ Disagree strongly

- 4) Do you think that dogs should be excluded from cemeteries and burial grounds?
 - ☐ Agree strongly
 - ☐ Agree
 - ☐ Disagree
 - ☐ Disagree strongly

- 5) Do you think that dogs should be put on a lead when instructed to do so by an authorised officer?
 - ☐ Agree strongly
 - ☐ Agree
 - ☐ Disagree
 - ☐ Disagree strongly

- 6) Do you think that a PSPO should be introduced limiting the number of dogs under the control of one walker to a **maximum of four** within Southwark's Cemeteries
 - ☐ Agree strongly
 - ☐ Agree
 - ☐ Disagree

- ☐ Disagree strongly

7) Do you think that a PSPO should be introduced limiting the number of dogs under the control of one walker to a **maximum of four** within Southwark's Parks and Open Spaces?

- ☐ Agree strongly
- ☐ Agree
- ☐ Disagree
- ☐ Disagree strongly

8) Do you think that a PSPO should be introduced limiting the number of dogs under the control of one walker to a **maximum of four** borough wide?

- ☐ Agree strongly
- ☐ Agree
- ☐ Disagree
- ☐ Disagree strongly

9) Do you think that a PSPO should be introduced requiring dogs to be on leads at all times in Southwark's designated nature reserves? i.e.

- ☐ Agree strongly
- ☐ Agree
- ☐ Disagree
- ☐ Disagree strongly

10) Do you think that a PSPO should be introduced requiring dogs to be excluded from Southwark's designated nature reserves? e.g. Sydenham Hill Woods

- ☐ Agree strongly
- ☐ Agree
- ☐ Disagree
- ☐ Disagree strongly

11) Do you have any other ideas or comments on the dog related ASB PSPO proposal that are not covered by the above questions?

12) Please tell us about any locations or areas where you feel dog mess is a particular problem.

Thank you for your views.

Equality monitoring template

Please confirm if you are filling in this form as;

- 1) Individual
- 2) Dog owner
- 3) Professional dog walker
- 4) On behalf of a group (please tell us which group)

(Please circle most appropriate option above)

Age		
Are you...		
<input type="checkbox"/> Under 16	<input type="checkbox"/> 35-44	<input type="checkbox"/> 75-84
<input type="checkbox"/> 16-17	<input type="checkbox"/> 45-54	<input type="checkbox"/> 85-94
<input type="checkbox"/> 18-24	<input type="checkbox"/> 55-64	<input type="checkbox"/> 95+
Disability and health		
Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?		<input type="checkbox"/> Yes, limited a little <input type="checkbox"/> Yes, limited a lot <input type="checkbox"/> No, not limited
Please tick a box or boxes below which best describes the nature of your impairment(s):		

<input type="checkbox"/>	Hearing / Vision (e.g. deaf, partially deaf or hard of hearing; blind or partial sight.)
<input type="checkbox"/>	Physical / Mobility (e.g. wheelchair user, arthritis, multiple sclerosis etc)
<input type="checkbox"/>	Mental health (lasting more than a year. e.g. severe depression, schizophrenia etc)
<input type="checkbox"/>	Learning difficulties (e.g. dyslexia, dyspraxia etc)
<input type="checkbox"/>	Memory problems (e.g. Alzheimer's etc)
If you wish to specify your impairment, please do so here:	
National identity	
What do you consider to be your national identity?:	
Ethnicity	
What do you consider to be your ethnicity? Please pick one section below and tick one box.	
White or White British	
<input type="checkbox"/> British	<input type="checkbox"/> Northern Irish
<input type="checkbox"/> English	<input type="checkbox"/> Irish
<input type="checkbox"/> Scottish	<input type="checkbox"/> Gypsy, Roma or Irish Traveller
<input type="checkbox"/> Other White (please specify if you wish):	
<input type="checkbox"/> Black or Black British	
<input type="checkbox"/> Black British	<input type="checkbox"/> Sierra Leonean
<input type="checkbox"/> Caribbean	<input type="checkbox"/> Somali
<input type="checkbox"/> Nigerian	<input type="checkbox"/> Other African
<input type="checkbox"/> Other Black (please specify if you wish):	
Asian or Asian British	
<input type="checkbox"/> Asian British	<input type="checkbox"/> Pakistani
<input type="checkbox"/> Indian	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Bengali	<input type="checkbox"/> Filipino
<input type="checkbox"/> Any other Asian (please specify if you wish):	
Mixed Background	

<input type="checkbox"/> White and Black Caribbean
<input type="checkbox"/> White and Black African
<input type="checkbox"/> White and Asian
<input type="checkbox"/> Other mixed background (please specify if you wish):
Other Ethnicities
<input type="checkbox"/> Arab
<input type="checkbox"/> Latin American (please specify if you wish):
<input type="checkbox"/> Any other ethnicity (please specify if you wish):

Preferred language	
What is your preferred language?	<input type="checkbox"/> English <input type="checkbox"/> Other (please specify if you wish):

Religion or belief		
What is your religion or belief?	<input type="checkbox"/> Christian	<input type="checkbox"/> Jewish
	<input type="checkbox"/> Sikh	<input type="checkbox"/> Buddhist
	<input type="checkbox"/> Hindu	<input type="checkbox"/> No religion
<input type="checkbox"/> Other religion or belief (please specify if you wish):		

Marriage or civil partnership status	
Are you married or in a civil partnership?	
<input type="checkbox"/> Married	<input type="checkbox"/> Registered in a civil partnership
<input type="checkbox"/> Divorced	<input type="checkbox"/> Formerly in a civil partnership which is now legally dissolved
<input type="checkbox"/> Widowed	<input type="checkbox"/> Surviving member of a civil partnership

Sex		
Are you...	<input type="checkbox"/> Male	<input type="checkbox"/> Female

Gender reassignment

Is your gender identity the same as the gender you were assigned at birth?

☐ Yes

☐ No

Pregnancy or maternity

Are you currently pregnant and / or on maternity leave?

☐ Yes

☐ No

Sexual orientation

Are you...

☐ Heterosexual/straight

☐ Gay man

☐ Lesbian/Gay woman

☐ Bi-sexual

If you prefer to use your own term please specify this here: