

**MINUTES OF THE MEETING OF THE
COMMUNITY LEADERSHIP AND PARTNERSHIPS COMMITTEE**

HELD ON 23 FEBRUARY 2015 AT 7.30 P.M. IN THE COUNCIL OFFICES, WEELEY

Present: Councillors Miles (Chairman), Amos, C Callender, Hawkins, Howard, Pugh and Tracey.

Also Present: Councillors Bucke and McWilliams (Well-being and Partnerships Portfolio Holder).

In Attendance: Democratic Services Manager (Colin Sweeney), and Democratic Services Officer (Janey Nice)

Also in Attendance: Sam Hepplewhite (Chief Operating Officer and Deputy Chief Officer of North East Essex NHS England Care Commissioning Group (CCG)), Lisa Llewellyn (Director of Nursing), Dr Lucy Moore (Chief Executive Officer and Chairman of Colchester Hospital University Foundation Trust (CHUFT)), Dr Gary Sweeney (Executive Chairman of the North East Essex CCG), Jenni Speller (Contracts Manager of NHS England - Essex Area Team) and Peter Wilson (Vice-Chairman of CHUFT)

48. WELCOME

The Chairman extended a warm welcome to all present.

49. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

An apology for absence was submitted on behalf of Councillor Patten.

50. MINUTES OF THE LAST MEETING

The minutes of the last meeting of the Committee, held on 19 January 2015, were approved as a correct record and signed by the Chairman.

51. DECLARATIONS OF INTEREST

- (i) Councillor John Hawkins informed the Committee that if the matters of end of life or palliative care were to be discussed under Agenda Item No.4 (Health-related Matters within Tendring), then he wished to record a disclosable pecuniary interest in this regard, by virtue of the fact he was the Vice-Chairman of the St Helena's Hospice.
- (ii) Councillor Lynda McWilliams declared a non-pecuniary interest in respect of Agenda Item No.4 (Health-related Matters within Tendring), by virtue of the fact she was a Stakeholder Governor of (CHUFT).

52. HEALTH-RELATED MATTERS WITHIN TENDRING

Provision of GP Surgeries within Essex

The Chairman invited Ms Speller to advise the Committee as to when the report with recommendations and an action plan for surgeries in Essex (Minute No. 33 of the meeting held on 17 November 2014 referred) would be publicly available.

Ms Speller said that the report was still being finalised but would be available shortly.

In response to a question from the Chairman, Ms Speller agreed to look into Kirby residents receiving letters encouraging them to move to the Thorpe-le-Soken Surgery, following that surgery being taken over the Kirby Cross Surgery.

CHUFT

Dr Lucy Moore delivered a presentation, which shared with the Committee, progress made by CHUFT with regard to improvements, especially as Colchester Hospital had been the subject of recent adverse media coverage.

Dr Moore informed the Committee that the key factors for success (based on the Hospital's full inspection report in May 2014) were:

- Ensuring that the right leadership was in place;
- Bringing the Hospital's governance structures to life;
- Real engagement with patients;
- More effective engagement with staff;
- Modernisation and improvement

Dr Moore said that these were all matters to be addressed in the short-term but that the immediate focus was on dealing with a significant number of issues, which included dealing with improvement of cancer care; putting in place leadership and management capacity at all levels and it was now time to move forward.

Dr Moore said that operational challenges had included the upgrading of IT systems, which had gone live at the end of November 2014. She said that the recruitment and retention of nursing staff had been the most challenging target faced as there had been a significant increase in the number of such vacancies, so much so, that nurses had been recruited from across Europe. Dr Moore added that bed closures had been because of staff shortages and this had also impacted on the Hospital's performance.

In response to a question from the Chairman with regard to how closely the Trust worked with Universities on the training of nurses, Dr Moore said that the Trust had not worked as closely as it could have with either the University of Essex or the Anglia Ruskin University however, a number of changes were now being put in place, which included looking at a programme of study which was currently being developed.

Dr Moore said that the inspection held in November 2014, which had its report published in January 2015, highlighted a number of actions that were needed to be taken, and she was pleased to say that the Trust was complying with these. She went on to say that, despite the bed base being reduced by 60 beds and the winter being particularly difficult, she was proud with what had been achieved and that further signs of recovery were becoming apparent.

In response to a Member's question regarding problems over delays in discharging patients, which usually took a number of hours to complete and which did not help the bed blocking problem, Dr Moore said this was an ongoing challenge and not helped with patients with complex needs, which made discharging them more time consuming however, the Trust was working with Essex County Council (ECC) to improve working practices and to cut bureaucracy.

In response to a Member's question regarding the Hospital's strategic objective in relation to patients dying in hospital, how this was measured and whether it was an issue for the Board, Peter Wilson responded that the Board looked at strategic objectives through different Committees. Dr Moore said that the inspection, in May 2014, had indicated two areas, which required work and when the inspectors had returned in November 2014, they were only concerned with those two areas. She added that the next inspection, due in 2015, would be more thorough and the Trust would have to show significant improvements to come out of special measures and that a special improvements Director was working

alongside the Trust to support an improvement plan, which was being monitored on a monthly basis.

Further issues that Members raised included the under-use of the Clacton and Harwich hospitals; increased housing expected in Colchester and whether those two hospitals could help reduce pressure on the Colchester Hospital. In response to a Member's question with regard to what key improvements could be expected in terms of patients, Dr Moore said that the Trust was working with Commissioners on both Clacton and Harwich sites to see if more could be done in the outpatients area and as to Stakeholders, Dr Moore said she would expect to see safety and quality across the board, whether it was mortality rates, avoidable incidents, learning from mistakes or expecting a more responsive service with patients at the Hospital.

CCG

The Chief Operating Officer and Deputy Chief Officer of North East Essex NHS England CCG, Ms Hepplewhite, said that, on the issue of health and social care, the CCG had moved forward significantly over the last six months. Dr Sweeney said it was important to work towards care at home, working with the community itself, not buildings, and that partnership working was essential.

Ms Llewellyn, Director of Nursing, said that nursing staff were very important but also community nursing was equally important and she added that the nursing issue was critical with recruitment and retention of nursing staff being a nationwide issue.

In response to a Member's question on the problem of bed-blocking and end-of-life issues, Ms Llewellyn responded by saying that the Hospital was trying to address the problem of the number of people on the end-of-life register and work was being done with hospices and hospitals working together to ensure patients' wishes were met. She added that improvements to the discharge process to allow patients home to die, if that was their wish, were ongoing.

Further discussion highlighted the need to retain nurses and to manage performance with partnerships to improve standards. Discussion also included the question of General Practitioners' (GPs) hours being cut, which had increased pressure on Accident and Emergency (A and E) departments and the use of the 111 telephone number was being encouraged to try and relieve pressure on A and E.

Councillor McWilliams, as a Trust Governor, informed the Committee that since Dr Moore had temporarily taken over as interim Chief Executive Officer at CHUFT, matters had improved and had come to the notice of the Governors.

The Chairman thanked the visitors from CHUFT and the CCG for their open and frank contribution and hoped that, in a year's, time improvements would be seen.

The Chairman also thanked Councillor Howard for all of the work he had put in to preparing questions as an initial basis for discussion at the meeting and the Democratic Services Manager confirmed that the questions had been sent to both the CCG and CHUFT to be answered, in writing, in due course.

The Chairman adjourned the meeting for a break from 8.53 p.m. to 9.05 p.m.

53. REPORT OF THE VICE-CHAIRMAN – INFRASTRUCTURE, PARKING AND REGENERATION OF MANNINGTREE TRAIN STATION

There was submitted a report by the Vice-Chairman of the Committee, Councillor Patten, which sought the Committee's approval to formally submit its findings to the Local Plan Committee, recommending that the proposals, which related to improvements to the

infrastructure, parking provision and future regeneration of Manningtree Railway Station, as contained within the report, be included within and considered as part of Tendring District Council's (TDC) emerging Local Plan and the equivalent document commissioned by Essex County Council (ECC).

The report provided details of a meeting that had been held at Manningtree Railway Station on 19 January 2015, at which, Councillor Patten, Paul Oxley (Abellio Greater Anglia – Stakeholder Manager), Jayne Sumner (Rail Manager Essex County Council (RCC)), Councillor G V Guglielmi (Tendring District Councillor and ECC Councillor, Chairman of TDC's Local Plan Committee and Portfolio Holder for Planning and Corporate Services), Martin Rayner, (Chairman, Mistley Parish Council), Penny Hughes-Stanton (Manningtree Town Council) Lesley Pallett, (Lawford Parish Council) and Colin Sweeney (Democratic Services Manager – TDC) had attended.

At that meeting, the following areas of concern, as these related to Manningtree Railway Station, and its neighbouring surrounds, were discussed:

- Increased traffic congestion and danger to pedestrians in the vicinity of the Station at peak times due to the inadequate road layout and level crossing there:
- Overspill parking in Lawford, Manningtree and Brantham; and
- Projected future growth and worsening impact due to major new housing and other development proposals in Brantham, Manningtree and Lawford.

Following a query by a Member as to the wording used at the third paragraph from the bottom of Page 8 to the report, it was **AGREED** that the words “....*however, Manningtree is recognised as the primary concern in this regard.*” be deleted.

A Member said that the non-existent connection of trains between the Manningtree to Harwich branch line and onward trains to London and Ipswich and Norwich was of particular concern as commuters tended to drive to, and park at, Manningtree rather than depart from branch line stations. He also commented that the Manningtree Station car park tended to be full by 11.00am and if parking charges were lowered, more drivers would use the car park and it would probably be full by 7.00am.

After further discussion, it was **RECOMMENDED TO CABINET** that:

- (a) The Committee, having considered the Abellio Franchise Specification consultation, as set out in the report, did not have any comments to make to Cabinet for consideration within its formal response to this; and
- (b) The report be referred to the Local Plan Committee for deliberation when considering its emerging Local Plan.

The meeting was declared closed at 9.22 pm.

Chairman