MINUTES OF THE MEETING OF THE CABINET, HELD ON FRIDAY, 17TH FEBRUARY, 2017 AT 10.30 AM ESSEX HALL, TOWN HALL, CLACTON-ON-SEA, CO15 1SE

Present: Councillors C Guglielmi (Vice-Chair, in the Chair), Ferguson, Honeywood, McWilliams, Turner and Watling

Group Leaders Present by Invitation:

Councillor Ivan Henderson and Councillor Mark Stephenson

- Also Present: Councillors Parsons and Steady
- In Attendance: Ian Davidson (Chief Executive), Martyn Knappett (Corporate Director (Corporate Services)), Richard Barrett (Head of Finance, Revenues and Benefits Services), Ian Ford (Committee Services Manager) and Nigel Brown (Communications Manager)

155. <u>CHAIR</u>

In the absence of the Leader of the Council (Councillor Stock), the Chair was occupied by the Deputy Leader of the Council (Councillor G V Guglielmi).

156. APOLOGIES FOR ABSENCE

Apologies for absence were submitted on behalf of Councillor N R Stock (Leader of the Council), Councillor M J Talbot (Portfolio Holder for the Environment) and Councillor J A Broderick (Leader of the Holland-on-Sea Residents' Group).

157. MINUTES OF THE LAST MEETING

It was **RESOLVED** that the minutes of the last meeting of the Cabinet, held on Friday 20 January 2017, be approved as a correct record and signed by the Chairman.

158. DECLARATIONS OF INTEREST

Councillors I J Henderson, G V Guglielmi and P B Honeywood each declared an interest in any item that bore relation to the work of Essex County Council insofar as they were also Essex County Councillors.

Later on in the meeting, as reported under Minute 163 below, Councillor G V Guglielmi declared an interest in the North Essex Garden Communities Peer Review (Report A.1) insofar as he was the Leader of the Council's designated substitute on the board of North Essex Garden Communities Ltd.

159. ANNOUNCEMENTS BY THE LEADER OF THE COUNCIL

There were none.

160. ANNOUNCEMENTS BY CABINET MEMBERS

<u>Urgent Care Review: Proposed Changes to Urgent Care (out of hospital services)</u> across North East Essex: Future of the Walk-In Centre and Minor Injuries Units

Councillor McWilliams (Portfolio Holder for Leisure, Health and Well-being) informed Cabinet that, assisted by Officers, she intended to submit a formal letter, on behalf of the Council, in response to the public consultation on the above.

The contents of the proposed letter were as follows:

"I write in response to your Urgent Care Review consultation and would like my comments to be considered as my formal submission for consultation.

My concerns are specifically around the Potential Approaches proposed for the Walk-In Centre in Colchester and the Minor Injuries Units in Clacton and Harwich.

I believe Potential Approach 1 would be in the best interests of Tendring residents – To continue to commission a Walk-in Centre (WIC) service in Colchester also the Minor Injuries Units (MIU's) in Clacton and Harwich is the correct approach to continue with at this time.

The reasons are that any changes to these services would be premature, particularly when Tendring is in the process of increasing the number of houses in the district. Major developments are already under way with many more on the horizon, bringing with them a significant increase in the population of Tendring over the next five to ten years.

The geographical make up of our district also poses a problem as large parts of our district are rural communities that can be isolated with very limited access to public transport.

If the Harwich MIU was closed there are difficulties for Harwich residents to access the Clacton MIU, this is due to a lack of good road infrastructure and available transport across that part of the district; the alternative route is to attend the Colchester WIC because of its more direct route along the A120; it would though be a long journey to make.

Without adequate public transport and limited road infrastructure there are many people who will find it difficult to travel to where they will receive the medical care they need. For this reason, there is a need to be able to offer appropriate primary care services to people within a reasonable distance from their homes.

The Secretary of State for Health's figure of 30% of cases at A&E are non-emergencies are of concern, and we know that GP surgeries in the district are under tremendous pressure and recruiting more practitioners to the area is notoriously difficult which must surely mean that Potential Approach 1 should be the choice for Tendring to prevent further pressure on A&E and GP Surgeries.

However as future housing developments materialise, the makeup of Tendring is likely to change quite considerably. It may be the case that as the district evolves Harwich and Clacton medical services become unsustainable as they currently exist and could end up being not best placed to serve the whole district. An alternative, more central medical centre, may need to be considered. I do understand and agree that we need to think differently about how services are delivered and there is a need for a certain level of 'culture change' in our residents/ patients. I have picked up on a point made by Bernard Jenkin MP about the need to triage patients in a way that is closely linked to the WIC and MIU's. We need to consider that there may be a better way to treat people who develop mild, short term illness or suffer minor injury and the service available needs to be properly tailored to that need.

- We have spoken and it has been highlighted more recently to use the services of pharmacists more frequently than has been in recent years. In order to do this, perhaps one of the options to be considered is a trial triage service involving pharmacists. Pharmacists could be based at the WIC and MIU's. The first person the patient sees is a medical professional (pharmacist) who can quickly assess the person and, where appropriate, deliver a first aid level of treatment or health advice. Anyone who cannot be treated by the pharmacist is then offered an appointment with a nurse or doctor (whichever is appropriate). In this way, patients are receiving a faster, more accessible level of medical attention and over stretched doctors are only seeing patients who need their expertise.
- It may be that by presenting pharmacists at the point of contact with the WIC and MIU's and intervening in a triage/ early treatment capacity, we start to see a reduction in demand on GP surgeries and associated services; and to encourage people to start changing behaviours with the first step they make being a visit to their local pharmacist instead of calling their local doctors surgery or turning to the MIU or A&E.
- Lack of transport is an issue and a review would be needed, especially with the
 expected increase in housing. Alternatively, and without wishing to revert to 'the
 old way of doing things', there was a time when we didn't always have a fully
 equipped ambulance response to transporting every patient to A&E or a medical
 centre. Perhaps a similar fleet of vehicles equipped with a basic level of medical
 equipment and trained staff could be made available to transport patients with a
 low level need a reasonable distance (i.e. within the district) to receive treatment.
- There is a concern that many people, especially the younger generation do not know basic First Aid. Is this another area that people could be encouraged to change their behaviour through guidance on First Aid.
- In order to optimise the MIUs I believe that rather than consider reducing services one of the options should be in relation to increasing and maximising the use of the MIUs. They could provide the opportunity for expanded minor surgical and clinical delivery at a local level. This expansion of the service would reduce the pressure on Colchester Hospital and be a much better outcome for patients. We know that Tendring has an above average number of people who are not registered with a doctor and therefore to leave Colchester Hospital as their first port of call and not retain the MIUs and the walk-in centre would be a false economy.

In conclusion, I believe we must continue with the Clacton and Harwich MIU's and Colchester's WIC. Serious consideration needs to be given to: -

- the public transport network in our district and means by which patients can travel to access medical facilities
- the future population growth that will come with the major housing developments that have been agreed by our planning department
- a need for alternative ways of delivering patient care closer to people's homes.

I hope that the CCG will have the opportunity to show some creativity in its thinking rather than sticking solely to options that centre around the financial constraints of keeping a facility open in its current form. People need accessible primary care facilities and I hope that you can be willing and open to working with other stakeholders in the area to come up with some more creative, and practical options."

Members of the Cabinet, together with the Leader of the Labour Group and the Leader of the UKIP Group, expressed their support for such representations being made.

It was agreed that the proposed letter would be sent to all Members of the Council in order that they too could express their support.

161. MATTERS REFERRED TO THE CABINET BY THE COUNCIL

There were no matters referred to the Cabinet by the Council on this occasion.

162. MATTERS REFERRED TO THE CABINET BY A COMMITTEE

There were no matters referred to the Cabinet by a Committee on this occasion.

163. <u>REPORT OF THE LEADER OF THE COUNCIL - A.1 - NORTH ESSEX GARDEN</u> <u>COMMUNITIES PEER REVIEW</u>

Councillor G V Guglielmi declared an interest in this item insofar as he was the Leader of the Council's designated substitute on the board of North Essex Garden Communities Ltd.

There was submitted a detailed report by the Leader of the Council (Report A.1), which provided Cabinet with information on the outcome of the Peer Review of the Garden Communities project led by Lord Kerslake, and the partnership's public response and the next steps in responding to the recommendations of the Review.

Cabinet was reminded that, in October 2016 the Leaders and Chief Executives of Tendring District, Colchester Borough, Braintree District and Essex County Councils had asked Lord Kerslake to lead a Peer Review to look at the local authorities approach to delivering Garden Communities in North Essex.

The Brief had been agreed by the North Essex Garden Communities Shadow Delivery Board at its meeting held on 3rd November 2016 and had included the following six questions:-

- Are we ambitious enough (place shaping)?
- How do we maintain quality and pace of build development?
- Are we maximising our position with Government in terms of support and *Funding*?
- Are we positioned to exploit any commercial income streams which could

come from the development?

- What's the best vehicle for managing the opportunity? and
- Do we have the capacity and capability to oversee the developments effectively?

Cabinet was informed that the Review Team had reviewed a range of background documents provided by the Garden Communities project team and had visited the proposed locations. It had met with the lead Directors of the four Councils who had explained the background and the reasoning behind the approach the Councils were taking towards the proposals. The Directors had also submitted a self-assessment against the six questions. The Review Team had subsequently spoke with the Councils' planning teams, key advisors, landowners, developers and officials at the Department for Communities and Local Government (DCLG) in order to clarify and explore specific areas of interest in more depth. The review had been able to take account of evidence submitted by local groups, including CAUSE, although in the time available it had not been possible for the Review Team to engage directly with local communities.

It was reported that the Review Team had presented its findings to the Leaders and Chief Executives of the four Councils in early December 2016. In late January 2017 the report of the Peer Review had been published. The partnership of the four Councils had also produced a response to the Peer Review report and recommendations and both documents had been published on the Council's website.

Members were also informed that an Action Plan was being developed by the Garden Communities Project Team.

The Cabinet had before it a summary of the Kerslake report's findings and recommendations together with a summary of the response of the partnership to those recommendations.

Having considered the information submitted, it was moved by Councillor G V Guglielmi, seconded by Councillor Turner and:

RESOLVED that Cabinet notes:

- a) the outcomes of the North Essex Garden Communities Peer Review Report;
- b) the key points of the North Essex Garden Communities' partnership's public response; and
- c) that both documents have been published in full on the Council's website.

164. <u>REPORT OF THE INTERIM CORPORATE SERVICES PORTFOLIO HOLDER - A.2 -</u> <u>PERFORMANCE REPORT - QUARTER THREE - OCTOBER TO DECEMBER 2016</u>

There was submitted a report by the Portfolio Holder for Corporate Services (Report A.2), which presented the Performance Report for the period October to December 2016 (Quarter Three).

Cabinet was aware that the Performance Report 2016/17 set out the detailed actions and targets for the delivery of the Council's priorities for the coming year.

It was reported that three of the indicators and projects highlighted in the report were deemed 'non measurable' as the Council's role was that of 'influence' only. Of the 14 indicators and projects where performance was measured, 10 (71%) were on, or above, their expected target and 4 (29%) were not currently in line with the expected performance. Explanations of the performance and the supporting data were included under each topic in the report.

Cabinet was informed that this report had been submitted to the Corporate Management Committee at its meeting held on 13 February 2017. Any feedback from the Corporate Management Committee would be presented to a future meeting of the Cabinet as a separate reference report.

Councillor G V Guglielmi placed on record his appreciation of the Planning Services section for their continued hard work in managing the high number of planning applications being received.

Having considered the information provided:-

It was moved by Councillor G V Guglielmi, seconded by Councillor Honeywood and:-

RESOLVED that the contents of the report be noted.

165. <u>REPORT OF THE INTERIM FINANCE AND REVENUES & BENEFITS PORTFOLIO</u> <u>HOLDER - A.3 - CORPORATE BUDGET MONITORING REPORT FOR THE THIRD</u> <u>QUARTER OF 2016/17</u>

There was submitted a report by the Portfolio Holder for Finance, Revenues & Benefits (Report A.3), which provided Cabinet with an overview of the Council's financial position against the budget as at the end of December 2016.

Cabinet was informed that the position to the end of December 2016 showed that overall the actual General Fund Revenue position was behind the profiled budget by $\pounds 2.949$ million. After allowing for significant one-off budgets such as the Fit for Purpose Budget where commitments or decisions were still to be made, the position was revised to $\pounds 0.532$ million ahead of the profiled budget. A considerable element of that variance was due to the timing of expenditure and income although some emerging issues had been identified which were explained within the report.

It was reported that in respect of other areas of the budget such as the Housing Revenue Account, Capital Programme, debt recovery, treasury activity and LCTSS / council tax and business rates there were no significant issues that had been identified to date.

Cabinet was made aware that, as in previous years, it was recognised that a number of smaller variances within services emerged over the course of the year that would not necessarily be specifically highlighted or discussed within the Corporate Budget Monitoring reports. Although a significant number of budgets had been revised as part of the financial strategy process, it was still possible that a range of smaller variances may remain at the end of the year and contribute to the overall position. Also it was reported that a number of budgets that related to schemes / initiatives or earmarked for

specific purposes might not be fully spent by the end of the year and could be subject to end of year processes, such as carry forward requests, and therefore remain committed. However, at this stage and after taking into account the current position and information available, it was anticipated by officers that any adverse issues would be offset by favourable variances elsewhere within the budget at the end of the year.

Having considered the information provided:

It was moved by Councillor G V Guglielmi, seconded by Councillor Honeywood and:

RESOLVED that the financial position, as at the end of December 2016, be noted.

166. JOINT REPORT OF THE DEPUTY LEADER OF THE COUNCIL AND THE LEISURE, WELL-BEING AND PARTNERSHIPS PORTFOLIO HOLDER - A.4 -BRIGHTLINGSEA SWIMMING POOL

There was submitted a joint report by the Deputy Leader of the Council and the Portfolio Holder for Leisure, Health and Well-being (Report A.4), which sought:

- to advise Cabinet of the proposal submitted by Brightlingsea Town Council (BTC) in respect of the future of Brightlingsea Swimming Pool (BSP); and
- to consider that offer in light of the financial implications and to determine whether to accept that offer and the impact of such an acceptance.

It was reported that, following the decision made by Cabinet in June 2016 to accept an offer from BTC to undertake capital repairs to BSP and for TDC to cover the running costs of the pool for the shortened 2016 season, communication and discussions had been ongoing between BTC and TDC about the future of the Pool.

Cabinet was aware that a deadline had originally been set for the end of 2016 for a decision to be made as to whether BTC would take a long lease on the Pool and to maintain and operate the Pool thereafter or for TDC to decommission the Pool.

Following a meeting in early 2017, at which BTC had set out the actions it had taken to evaluate the feasibility for them operating the pool, a proposal had been submitted by BTC to part meet the cost of operating the pool for the 2017 season in order to allow BTC more time to complete their feasibility work.

The proposal made by BTC was as follows:

- 1. BTC agrees to make a contribution of 50% of any operating loss for the 2017 season, up to a maximum of £30,000;
- 2. In order to minimise losses and maximise revenues it is recommended that the official opening period of the pool is truncated and limited to eight weeks from the 15th July to the 9th September. This will allow the pool to be prepared and ready for the six week school holidays;
- BTC will commit to developing a business plan and exploring options in respect of site improvements, grant aid funding, the use of renewable energy technology and community/trust involvement in the future management of the facility;

4. BTC will commit to providing a full report on all of its findings and proposals to TDC at a meeting to be held on 21st September (provisional date) at the Brightlingsea Parish Hall;

Councillor G V Guglielmi thanked Brightlingsea Town Council for making such a strong case for keeping the swimming pool open.

Having considered the information submitted:

It was moved by Councillor G V Guglielmi, seconded by Councillor McWilliams and:

RESOLVED that:

- a) Cabinet agrees to the proposal set out by Brightlingsea Town Council;
- b) Cabinet delegates authority to the Corporate Director (Operational Services) to manage the impact of the reduction in savings within existing budgets in consultation with the Head of Finance, Revenues and Benefits; and
- c) Cabinet agrees that, by the end of September 2017, arrangements be put in place to commence the transfer of the pool to Brightlingsea Town Council, the exact details of the transfer arrangements to be agreed by the Corporate Director (Corporate Services), <u>or</u> further agrees that the Pool be decommissioned and authorises the Corporate Directors (for both Corporate Services) to commence the decommissioning process.

167. MANAGEMENT TEAM ITEMS

There were none on this occasion.

The Meeting was declared closed at 11.30 am

<u>Chairman</u>