

**MINUTES OF A MEETING OF THE WEST ESSEX AREA FORUM HELD AT
THE ADULT COMMUNITY COLLEGE, ONGAR, ON 10 March 2011**

Membership

*** Present**

Essex County Council

* E Webster (Chairman)	* G McEwen
* B Aspinell	* V Metcalfe
S Barker	* G Mitchinson
* R Chambers	Dr A Naylor
* M Garnett	* C Pond
R Gooding	* J Roberts
A Jackson	* S Walsh
* E Johnson	J Whitehouse
* D Kendall	Vacancy
* J Knapman	

Brentwood Borough Council (2)

Louise McKinlay	- Leader
Joanna Killian	- Chief Executive
* Adrian Tiddoyed	

**Epping Forest District Council
(2)**

Diana Collins	- Leader
* Derek MacNab	- Acting Chief Executive

Harlow District Council (2)

Andrew Johnson	- Leader
Malcolm Morley	- Chief Executive

Uttlesford District Council (2)

* Jim Ketteridge	- Leader
John Mitchell	- Chief Executive

Local Councils (3)

* David Aldridge	- Great Dunmow Town Council
* Cllr Y Maguire	- Kelvedon Hatch Parish Council
* Joan Bowerman	- Matching Parish Council
* G Smith	- Doddinghurst Parish Council
* Sheila Jackman	- Ongar Town Council and Vice-Chairman for EALC
* Enid Waugh	- Loughton Town Council
Patricia Barber	- Takeley Parish Council
Cllr P Hammond	- Theydon Bois Parish Council
Cllr A Purkiss	- Theydon Bois Parish Council

**Hospitals & Primary Care Trusts
(4)**

Catherine O'Connell	- NHS West Essex
* Darren Leech	- Princess Alexandra Hospital NHS Trust, Harlow

Police (2)

Chief Superintendent Simon	- West Division, Essex Police
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Williams		
Chief Inspector Alyson Wilson		Uttlesford District
Fire (1)		
Station Commander John Sherrington	-	Harlow, Essex Fire & Rescue Service
* R Farrant	-	Essex Fire & Rescue Service
Councils for Voluntary Service (4)		
Jackie Sully	-	Rainbow Services, Harlow
Jacqui Foile	-	Voluntary Action Epping Forest
Eric Hicks	-	CVS Uttlesford
* John Fry	-	Brentwood CVS
LINKs (2)		
* J Carr	-	LINKs
* J Harkus	-	LINKs
* G Swain	-	LINKs

Also Present

(from the attendance book – and as there described)

David Linnell, Loughton Residents Association and D Fairchild, Brentwood CVS.

Officers Attending in Support

* Samantha Ball	-	Committee Assistant
* Vivien Door	-	Committee Officer
* Yvette Wetton	-	Area Coordinator

12. Welcome

The Chairman welcomed Members of the Forum and members of the public to the meeting.

13. Apologies

Apologies for absence had been received from Cllr S Barker, ECC; Cllr J Whitehouse, ECC; Peter Baggott EALC Brentwood; D Collins, Leader Epping Forest District Council; Jacqui Foile, Voluntary Action Epping Forest; Cllr B Judd, Ongar Council Town Council; David Matthews Debden Parish Council; Aimi Middlehurst, Parish Clerk Ingatestone & Fryerning Parish Council; John Mitchell, Chief Executive, Uttlesford District Council and Jackie Sully, Executive Director, Rainbow Services.

14. Declaration of Interest

There were no declarations of interest.

15. Minutes

The Minutes of the meeting of the West Essex Area Forum held on 16 November 2010 were approved as a correct record and signed by the Chairman subject to the following amendments being made.

Minute 5, Local Transport Plan

The fourth bullet point under “During the discussions...” should read, “There would be a high speed rail link...”;

The penultimate bullet point should read “...Epping Underground Railway Station and “...London Underground had been contacted regarding reopening the line...;

An extra bullet point was included:

- Some Members were concerned that the examples in the five priorities were mainly Harlow projects and did not illustrate other areas in West Essex.

The second point at the end of this item was amended to read:

- ii) **That Hail and Ride Bus Services should be available for all residents on routes including roads where there were no designated bus stops.**

Minute 7, Olympics and Paralympics 2012 Games, Lee Valley Water Site, at the end of the first line it should read “... will open on April 2011 ...”

Hadley was amended throughout the minutes to Hadleigh”

Seventh bullet point was amended to read “...Epping Forest Underground link...”

16. The Cluster Arrangements and the changes within NHS structures locally

The Forum received a presentation from Jonathan Marron, Director of Strategy and Planning, South West NHS.

Jonathan Marron highlighted the changes in the NHS and how the PCTs were planning to advise GPs with their commissioning function for 2013. Currently GPs were forming four Clusters to commission in South East Essex and three Clusters in South West Essex. GPs could work across PCT boundaries but it may be more difficult to work across Council borders. The plan was to have GPs commissioning work by April 2012 in readiness for the closure of PCTs in April 2013. The PCT would use its resources to enable GPs to shadow commission from April 2012.

There was a financial challenge for the next 18 months for PCTs to work within their budgets whilst using PCT staff to work with GP consortiums to enable them to take over the commissioning services. The new PCT structure includes Direct Commissioning Support for GP Clusters to provide information, for example, on procurement, commissioning and technical support and to build good relationships with all GPs.

During the discussion the following points were made:

- From April 2013 the NHS Commissioning Board would ensure GP standards and inspect premises, currently provided by PCTs;

- As GPs were responsible for requesting treatments giving them the budget to commission the services would provide the best care for the individual patients whilst providing an awareness of the overall budget;
- That Sheila Bremner was leading the Northern Essex Cluster which includes West Essex;
- There was patient "Choose and Book" for elective treatment where patients could decide which hospital to attend for their treatments, Emergency calls were treated differently. A decision would be made as to where the Ambulance Crew took the patient dependent on the condition of the patient and the appropriate Hospital with resources available. The Ambulance Trust would be able to provide more information on where patients were taken in an emergency situation;
- Patients who need to attend Maternity units may be sent to the nearest hospital with space to accommodate their individual needs ;
- The consultation regarding the proposed changes to the Brentwood Mayflower Hospitals highlighted that patients mainly had too long a stay in hospital beds which did not help their recovery. Work was currently taking place with GPs to reduce the length of stay in hospitals. GPs have been engaged in the process and made improvements to the consultation;
- PCTs receive £55 for each patient whereas GPs receive £25 per patient;
- That NHS Services in West Essex work across boundaries with Hertfordshire and London Boroughs to provide economies of scale;
- Commissioning was funded regionally for patients with rare conditions;
- GPs were engaged with the need for high quality services/pathways for their patients, although the funding may be tight over the next three to four years;
- Since Essex County Council has received an Improvement Notice for Safeguarding Children it had worked very hard with all agencies that have safeguarding responsibilities to ensure that robust procedures were in place.

The Chairman thanked Jonathan Marron for his interesting and informative presentation

17. Public Health White Paper on Health and Well-Being Boards

The Forum received a presentation on the new Public Health White Paper on Health and Well-Being Boards from Loretta Sollars, Health Partnerships Delivery Manager, Essex County Council.

Loretta Sollars highlighted the changes in Public Health responsibility. The Healthy lives, healthy people: our strategy for public health in England White Paper, 2010

Southend Unitary, Thurrock Unitary and Essex County Council would have separate Health and Wellbeing Boards. Councillor Martin, the Leader of Essex County Council would become the Chairman for its Health and Wellbeing Board. Membership would include the Directors for Schools,

Children and Families Directorate and Adult Social Services, the Director of Public Health and Health Policy, HealthWatch (currently LINKs) and District and Borough representatives. Key issues would require joint commissioning, for example, joint commissioning on alcohol treatment. The GP Consortia would work with the Joint Strategic Needs Assessment (JSNA), and the Local Authority to plan for local needs.

The Aim was to ensure that the least healthy people become healthier the quickest. A proportion of the Public Health Framework would be to protect people's health from national emergencies, for example, Flu Pandemic. There were broader causes which shorten life expectancy, for example, lack of education, a job and the physical area the person lives in. Lifestyle choices also shorten life expectancy, for example, smoking and obesity, Public Health works on publicity to inform the public on ways to change their lifestyles. Work was taking place to prevent illnesses or falls by providing the elderly with amendments to their housing environment and to help keep them active and to help prevent people dying prematurely from cancer and liver disease and other long term illnesses.

The Public Health Outcomes Framework would work together with the Adult Social Care Outcomes Framework to ensure that the NHS and or the GP Consortia Commissioning Body would be accountable. The funding routes from the Public Health England for the National Health issues, regarding change for life campaigns. The NHS Commissioning Board would either directly commission or task GP consortiums to do this work through the Health and Wellbeing Board to provide the work jointly. Public Health receives 4% of the NHS budget, the Local Authority would not receive this entire budget but it would be ring fenced for Public Health. There was currently no clarity around the public health boundaries, in hard winters, some PCTs provide funding for gritting the pavements to prevent falls whilst other do not. There was a proposal within the consultation for a health premium to reward Local Authorities who have successfully reduced health inequalities.

The Shadow Health and Wellbeing Board would be in place in April 2012 with a shadow budget. A joint appointment for Public Health between Local Authority and NHS England. The deadline for the three consultations was 31 March 2011. Public Health would produce a joint response from Essex and the Cluster PCTs which would feed into the pre-shadow Health and Wellbeing Board.

During the discussion the following points were made:

- There was currently no Child Care Outcomes Framework, the Director for Public Health would liaise with the Schools, Children and Families Director;
- There was a huge challenge to raise the life expectancy inequality, in some parts of Essex it was a 9 year difference;
- The rise in obesity, alcohol and drug abuse could be a great threat to public health in the next 10 years if people's behaviour was not changed;

- That by the Government giving an incentive to Local Authorities who have improved life expectancy inequalities it would ensure that best practice was shared by other Local Authorities;
- Public Health would look at building a better evidence base regarding the cost effectiveness in regard to preventing health issues, it may mean that, for example, the Local Authority would need to invest to provide benefits at a later date;
- An emergency admission costs approximately £2,500 whilst a broken hip could cost approximately £10,000 per patient;
- A member informed the Forum that there was a cost to raising the life expectancy of older people, they may work longer which could impact on young people obtaining jobs;
- That the Health and Wellbeing Board would be subject to scrutiny;
- There was an aspiration to work more closely together with the District Councils to enable changes to be made to people's behaviour by using District leisure facilities, for example.

The Chairman thanked Loretta Sollars for her interesting and informative presentation

18. Developments in Adult Health and Community Wellbeing

The Forum received a presentation from John Mackinnon, Senior Operational Manager.

John Mackinnon informed the Forum that good housing was key to providing homes for local people, approximately two years ago facilities for people with Autism were provided which saved £500,000 to the Local Authority. The Learning Disability budget had been reduced. West Essex NHS was in a good position as it had a good relationship with GPs and they seem to be ahead of the game with their pathfinders. The Quality, Innovation, Productivity, Prevention Plan looks at the top 20 areas and would commission on all Essex Safeguarding for vulnerable Adults and Children together.

The three hospitals in West Essex have had pressure on beds from the winter vomiting bug which had meant that 96 beds have not been available. NHS would be going through difficult challenging times over the next few years.

During the discussion the following points were made:

- There was concern that in West Essex patients access NHS services across different borders but the Health and Wellbeing Boards were defined by Local Authority borders;
- That the possible redundancies within the PCTs would be too early for the GP Consortia to pick up skilled people. Although both North and South PCT Clusters would be providing staff resources to aid GPs with the commissioning task.

The Chairman thanked John Mackinnon for his interesting and informative presentation.

19. Petition for Thorndon Park Car Parking

The Forum received an oral update from Yvette Wetton, Area Co-ordinator, regarding the petition by Mr Samson and Mr Bland MBE which had been presented to the Cabinet Member. Yvette Wetton informed the Forum that Brentwood Locality Members had met to discuss the petition and had made a joint formal response to Cllr Chapman as the Portfolio Holder.

20. Public Questions

There were no public questions.

21. Area Forum Format

The Chairman informed the Forum that it would be discontinued and that there would be no further meetings in the present format but that discussions were taking place regarding the best way forward to work closely with District and Parish Councillors. Meetings have taken place between the Cabinet Member, Area Forum Chairmen and Area Coordinators and other officers to find a way forward. The Chairman invited the Forum to write to her with their views on Area Forum meetings as there had been duplication of area meetings both at District and County level.

During the discussion the following points were made:

- That the Forums should be restructured to provide localism for County, District, Town and Parish Councillors and members of the public;
- That there could be a duplication of meetings for Councillors and officers who present items to these meetings, which in the economic climate could be costly for the County;
- Members of the Forum strongly felt that it was essential that there was a West Area Forum had been very informative and well represented by Districts, Town, Parish and County Members;
- Members felt that they found the themed meetings especially informative;
- Members were concerned that the future of the Area Forums had not been raised as an agenda item to allow full discussion at all Area Forums to consult Members to enable them to feedback suggestions into the new structure;
- Members felt that today's meeting had been very good with good information regarding the changes to NHS and Public Health.

Members thanked the Chairman and officers past and present for their work with the Forum and specifically thanked the Chairman for canvassing Members of the Forum for their opinions to try to preserve a local meeting.

22. Urgent Business

There being no further business, the Chairman expressed her thanks to members of the Forum and others for their attendance.

The meeting closed at 11.50 pm.

Chairman