

**SCRUTINY COMMITTEE held at COUNCIL OFFICES LONDON ROAD
SAFFRON WALDEN at 7.30 pm on 6 DECEMBER 2011**

Present: Councillor E Godwin – Chairman.
Councillors G Barker, I Evans, S Favell, S Howell, D Morson, J Rich
and D Watson.

Also present: Councillor S Barker (Portfolio Holder for Environment).
Councillor R Chambers (Portfolio Holder for Finance).

Guest speakers: Tom Church, Alan Westrup (East of England Ambulance
Service); Anne-Marie Grant (Head of Estate Management –
West Essex PCT), John Henry (Director – Estates and Facilities,
North East Essex PCT, Adrian Marr (Director of Finance – North
Essex Cluster) and Alison Vye – Senior Contracts Manager –
West Essex PCT.

Officers in attendance: R Auty (Assistant Director - Corporate Services),
R Dobson (Democratic Services Officer), S Joyce (Assistant
Chief Executive – Finance), J Pine (Planning Policy/DM Liaison
Officer), V Taylor (Business Improvement and Performance
Officer) and A Webb (Director of Corporate Services).

SC27 **APOLOGIES FOR ABSENCE AND DECLARATIONS OF INTEREST**

Apologies for absence were received from Councillors Davies and Oliver.

*Councillor Godwin declared an interest in relation to the planning application
for a GP practice in Stansted, as a member of the Planning Committee.*

*Councillor Watson declared an interest in relation to the item on the
ambulance service, as a member of his family worked for the East Anglia
ambulance service.*

*Councillor G Barker declared an interest in that he was married to Councillor
S Barker, Executive Member for Environment; and in relation to the item on
health provision, that he worked as a locum, and was on the performance list
of North East Essex.*

SC28 **MINUTES**

The Minutes of the meeting held on 25 October 2011 were received and
signed as a correct record.

SC29 **BUSINESS ARISING**

There were no matters arising.

SC30 **CONSIDERATION OF MATTERS REFERRED IN RELATION TO CALL-IN**

There were no matters referred in relation to call-in.

SC31 **RESPONSES OF THE EXECUTIVE TO REPORTS OF THE COMMITTEE**

There were no matters requiring responses from the Executive.

SC32 **AMBULANCE COVER AND EMERGENCY RESPONSE TIMES IN RURAL AREAS**

Tom Church gave a presentation on the operation of the East of England ambulance service, providing an overview of the number of staff, ambulance call out statistics and calls received. The service was supplemented by community first responders in rural areas. Due to implementation of a business transformation for the service, there had been changes to the “pathways” by which care was delivered. For example, assessment of a patient’s needs might require them to be taken to a specialist centre other than the local hospital.

In response to a question regarding the extent of the area covered by the ambulance service, Tom Church confirmed that ambulances would cross county borders, and summarised the management structure of the service, which covered the six counties of Bedfordshire, Cambridgeshire, Essex, Hertfordshire, Norfolk and Suffolk.

In reply to a question from the Chairman, Tom Church described the role of paramedics. Whilst paramedics were trained in advanced trauma support, the majority of calls did not require that level of care. Often what was required was not immediate transfer to hospital, but the setting up of community care as a “safety net” for the patient.

In response to a question regarding time taken to take patients to hospitals from rural areas, Tom Church said ambulances were capable of accessing Addenbrookes and Broomfields from most areas in Uttlesford within 20-25 minutes. Essex Ambulance Service achieved the national standard of 75% of responding to grade A calls within 8 minutes. Since the rural nature of the area was a factor in being able to give treatment, ideally within the ‘platinum 10 minutes’, it was essential to be sure clinicians were correctly tasked and had the right skills set. It was therefore important to get patients to the unit which could best deliver appropriate treatment. Resources for the service had increased by 6-10% annually for some years, in order to meet demand.

Members asked a number of questions regarding the evidently high level of training required for response teams. Tom Church described the skills and training for all stages of the process. Various questions were asked about the level of technical training required for Emergency Care Practitioners and Assistants (ECPs and ECAs). Tom Church said training for ECPs and paramedics was via two routes, internal training, or a degree course prior to entering the NHS. Whilst technicians were no longer being trained, those who were currently engaged were being kept on.

Members asked whether travel time from more remote locations had implications for the treatment administered at the roadside. Tom Church said it was necessary to assess the patient to know whether to avoid admission or transfer them to an acute unit. Assessment and stabilisation of the patient took up to 30 minutes, and time taken to do this was not affected by location.

Councillor G Barker asked a question regarding response times which fell outside the national standard of 8 minutes. Tom Church replied that of the 25% margin that fell outside the national standard, these tended often to have missed the target by less than a minute, and approximately 85% were responded to within 15 to 20 minutes.

Councillor Morson commended the Essex ambulance service for the wonderful assistance his family had received. He asked whether there were any aspects of the service which could improve.

Alan Worsthrup said engagement with other public services such as this Committee was the first step in improving the ambulance service. Early assistance provided by community first responders was of immense help to the service, and he would therefore also like to see an increase in the number of first response schemes, particularly in the more remote rural areas. He would be keen therefore to promote community participation in first aid courses within the district.

Councillor Godwin said the Committee had not fully appreciated how greatly the role of the ambulance service had changed, although from anecdotal evidence clearly many people were not admitted to hospital when once they would have been. She suggested that Mr Worsthrup contribute an article regarding community participation in first aid courses within the district which could be publicised through *Uttlesford Life* and neighbourhood magazines.

Councillor S Barker said there were three points she wished to raise. First, she asked about the tracking systems used by the ambulance service. Mr Worsthrup said recently all vehicles had been fitted with a new cab tracking system, which enabled them to pinpoint calls from telephones, mobiles and postcodes. Secondly, as Chairman of the Stansted Airport community trust, Councillor Barker said she was pleased to report that the trust had recently

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made a grant to Thaxted First Responders. Finally, she declared an interest as vice chairman of the Essex Fire Authority, and asked whether, in view of the fact that the fire service was currently running a trial on working jointly with first responders, there would be any further role for the fire authority in working more closely with the ambulance service.

Tom Church said he was aware that a trial had been taking place, and that whilst the ambulance response standard would be unlikely to be satisfied by retained fire fighters, nevertheless, the involvement of disciplined professionals was always of assistance. Councillor Barker said she would raise this point with the Chairman of the Fire Authority.

Councillor Watson commented on the fact that the ambulance service was not considered to be one of the essential emergency services. Mr Church said the ambulance service had received significant investment during the last 10 years, and was content to be known by its good reputation.

Councillor Godwin thanked Tom Church and Alan Worsthrup for a very interesting presentation, which Members greatly appreciated.

SC33

FORESTHALL PARK SURGERY S106 UPDATE

Councillor Godwin welcomed Anne-Marie Grant and John Henry to the meeting. She said members were at present to some extent limited in their scrutiny of this topic, due to the requirement that they should not prejudice consideration of a planning application for the surgery which had recently been submitted.

John Henry said the capacity of the current surgery in Stansted was significantly inadequate, and it was pleasing that the new health centre now looked likely to go ahead. He outlined the Section 106 agreements made by the two developers at Foresthall Park, Taylor Woodrow (now Taylor Wimpey) and Croudace.

Councillor Godwin thanked John Henry for his summary of the current situation and asked for officers' comments. The Planning Policy/DM Liaison Officer said the Section 106 obligation on Taylor Wimpey had been either to donate the land for the health centre, or to pay part of the cost of the construction of an off-site facility. Following the protracted delay in identifying a potentially suitable site, an application for planning permission had now been received from the Hilton group on the Lotus Garage site in Stansted Mountfitchet. In order to progress the Section 106 agreement, (subject to the granting of planning permission for the new health centre), it was necessary for the NHS formally to confirm they did not need Taylor Wimpey to donate the land, and therefore to require the contribution instead. Regarding Section 106 monies from Croudace, the next step would be to confirm that payment was now due.

Anne-Marie Grant then gave a summary of progress following seven years of negotiations for various options for a new surgery for Stansted. She gave details of the newly submitted planning application. The application was for a mixed use development with retail units at ground level, with the health centre on the first and partly on the second floor, and the rest of the building comprising flats. Neither the existing surgery nor the health centre at Crafton Green remained fit for purpose, particularly for patients with mobility problems; and the facilities at both would be relocated to the new health centre. The new centre would also have an NHS dental practitioner. She said it would be likely to be approximately two years before the new health centre would open.

In reply to a question from Councillor Morson, Anne-Marie Grant said there should be no loss of staff from the Stansted surgery.

Members asked about car parking provision. Anne-Marie Grant said the proposals were for 50 car parking places for the health centre and visitors. Discussions were taking place with the developers regarding the car park owned by the Council, which they considered could be remodelled to retain the same number of public car parking spaces, whilst including 50 places leased to the health centre.

In reply to a further question regarding access, Anne-Marie Grant said the developer had undertaken a great deal of work with the County Highways Authority and with independent specialists to improve the existing access to the site.

In conclusion she said there was much public support for the location of the centre at this site; and that it was overwhelmingly preferred to the site proposed at Foresthall Park.

Councillor Rich asked about measures which would be considered to minimise the impact of power cuts affecting the proposed bridge access to the centre, as Stansted was unfortunately occasionally subject to power cuts. Anne-Marie Grant said she would take up this point with the developers.

Councillor Godwin thanked the speakers and said that as the application was now live, members were very constrained in their observations.

SC34

GP PROVISION AND THE FUTURE OF THE PCT

Councillor Godwin said Members were concerned about how the new proposals for GP provision would work.

Adrian Marr gave a summary of the progress of the Health and Social Care Bill and of the structures to be established in place of the PCT. He said there

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would be four regional bodies and 50 smaller outposts; and that Uttlesford came within the cluster currently designated 'North Essex', which covered a population of just under 1 million. He summarised the responsibilities of the national commissioning board, which included the commission of specialist services, as well as primary care services and responsibility for performance management of local systems.

Health and Wellbeing Boards were also being set up, and would comprise local authority members as well as NHS members. There would be three Clinical Commissioning Groups for Essex, each of which would operate on behalf of a population of 300,000 and which would be responsible for the vast majority of services, including commissioning for district general hospitals, mental health, community services, prescribing, and ambulance services.

Adrian Marr described transition arrangements under which Epping, Harlow and Uttlesford PCTs had been aggregated to form a single 'cluster' organisation, so as to reduce running costs. The three PCTs localities would remain in existence until 31 March 2013. Work was being done to support procurement on behalf of Clinical Commissioning Groups, and formal competence reviews for CCGs would take place in July and October 2012. Similarly the three Strategic Health Authorities had been aggregated into one organisation, based in Cambridge.

The Bill also provided for the establishment of senates, to be made up of senior clinicians whose role would be to provide guidance on clinical aspects of provision of services.

Adrian Marr provided a summary of funding allocations, which for the three PCTs in North Essex would be announced in December. In the next financial year they would receive a cash uplift of 2.7%; 'shadow' allocations for 2012-2013 would be issued to emerging CCGs. Authorisation of the CCGs would take place from July to October 2012; in the meantime there would be continuing evaluations of governance. He referred to recent assessments by the Responsible Authorities Group and the Strategic Health Authority, under both of which West Essex PCT had scored reasonably well.

Councillor Godwin said it was clearly the case that a vast re-organisation was going on, including transfers of employees, and that costs must be extraordinary.

Councillor G Barker asked what difference patients would see.

Adrian Marr said whilst this question would best be directed to Dr Susan Humphrey who unfortunately could not attend tonight, the changes would mean GPs would influence services and have responsibility for the budget process. There was a good level of GP engagement in the CCG for West Essex; however the new process would be more complex in that budgets

would be likely to be divided between different bodies rather than a single body, as had been the case with the PCTs.

In reply to a question from Councillor G Barker regarding risks, Adrian Marr said minimising risks was inherently part of setting up new procedures, and the establishment of the new bodies was taking up a significant management resource at a time when there was a £10million reduction in running costs for the NHS in Essex.

Adrian Marr said the most challenging aspects of the process were the ongoing consultation and the need to keep key staff focused and on board; which was not easy in view of the significant reductions of manpower. However, he considered good progress was being made.

Councillor Rich queried whether the process could have been handled differently. Adrian Marr said work was still being done with the current PCTs, so that the public should not be able to tell the difference.

Councillor Godwin thanked Adrian Marr for his presentation and suggested the Committee should seek a further opportunity to scrutinise the process of establishing commissioning bodies at a future date.

The Committee then received an update from Alison Vye regarding GP surgery appointment issues about which Members had inquired at the last meeting. She said it was possible to assess patient satisfaction from a number of sources, such as data from GP practices and comments cards. Using this data, action plans were agreed for the lowest scoring third of practices to improve access to services, and in particular, to improve telephone access and availability of appointments. Although no national target was imposed in relation to appointment times, there were recommendations regarding the number of appointments to be made available and the ratio for urgent/routine appointments. The Committee could be reassured that many practices were doing what they should and that those which were not were being monitored.

In reply to further questions from Members regarding patient comments, Alison Vye said GP and dental practices varied in how the comments cards were displayed, but that patients across the board had the opportunity to comment and the PCT acted on every comment received.

SC35

CAR PARKING CHARGES

Councillor Barker presented a report on a review of pay and display car parking charges. The report set out proposals which would be considered by the Cabinet on 19 January 2012, and the Committee was invited to endorse the proposals and provide comments for consideration.

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Councillor Barker highlighted recommendations put forward by the Parking Partnership and Portfolio Holders. She referred Members to the need for the Council to increase its income, and to the fact that if the proposals were successfully implemented they would produce a net budgetary saving estimated at £114,000 per annum.

Councillor Evans asked a question regarding a possible rebate to apply to parking at the car park near the Tesco and Co Op stores in Stansted, as she felt those who parked on Lower Street would be interested in a similar concession. Councillor Barker said rebates could be proposed for any car park provided businesses were willing to meet the costs of the rebate.

Councillor Chambers said he could now confirm that Thaxted Parish Council would take on responsibility for Thaxted's car park and toilets.

Councillor Godwin welcomed the report's emphasis on sound financial management, but considered it would be appropriate to review implemented proposals in 2014 rather than in 2016. Regarding the proposals themselves, she welcomed the proposal for free parking after 5pm, and for a facility to pay by text; she asked for further details on the reasons why it was stated that pay on exit car parks were not suitable for this district.

Councillor Barker said the cost of running pay on exit car parks technology was £250,000, that staff were still needed, and that this method was more suited to big volume car parks. Regarding payment by text, there were certain issues to be resolved such as the redemption of car parking charges by supermarkets, and the lack of a printed ticket to display.

Councillor Favell asked about the costs of installing new machines for text payment facilities, as she would not wish to see the budgetary savings of £114,000 being absorbed by equipment costs.

Councillor Barker said costs of implementation by the Parking Partnership would be met out of efficiencies and other changes to be made, and that the Council benefitted from economies of scale as a member of the Parking Partnership.

Councillor Chambers said the saving of £114,000 were estimated and the figure would be reviewed if circumstances changed, for example if the national economic situation deteriorated.

In reply to a question by Councillor Morson, Councillor Chambers said parking arrangements in other districts had been studied and that the charges being considered in Uttlesford were comparatively low. Councillor Barker said there were other changes to the parking payment machines which would need to be made next year to take into account a coin change. There was also the issue of overpayment, which in this district was 1% compared to an average of 7%

across the Parking Partnership. Councillor Morson asked further questions about the viability of texting as a means of payment. Councillor Barker replied that this method was becoming more common and was in line with people's changing expectations; and that the review of car parking charges represented an opportunity to consider this benefit.

Councillor Rich said the car park behind Crafton Green in Stansted tended to be empty during most of the day. He suggested this car park could be better used if access changes were made using the old Sworders' site. Councillor Evans said awareness of the availability of this car park could be improved by better signage.

In reply to a query regarding the changes to be made to the Lower Street car park as part of any development of a new GP practice, Councillor Barker said such matters would form part of the discussions with the developers, but that the aim would be for costs arising from disruption during change of use of the car park to be met by the developers rather than the Council.

Councillor Watson objected to the proposal to alter the parking time available at The Common car park in Saffron Walden. He said long stay parking was already available at Swan Meadow. He considered this proposal should be reviewed earlier than within two years, because footfall in the town could decrease if this change were implemented.

Councillor Barker said the Council had to listen to people's wishes, as expressed in a petition asking for this proposal. She accepted The Common car park was not intended to be taken over by long-stay users, to the detriment of the businesses in the town centre. She would be content to review the use of The Common car park in one year in order to assess whether use as a 'turnaround' car park had decreased.

Councillor Rich said the primary function of car parks was not to maximise income for the Council.

Councillor Chambers said that whilst as Portfolio Holder for Finance he was responsible for the Council's finances, the last thing he wished to do was to disadvantage the town centre and he aimed to achieve the right balance between car parking charges and the interests of local residents and businesses.

Councillor Barker agreed that the following changes to the proposals should be considered: the proposals should be reviewed within two years, with the longer term tariff in The Common car park in Saffron Walden being reviewed in a year's time; signage for the car park at Crafton Green in Stansted should be improved; the developers of the proposed GP surgery in Stansted should be required to state what measures would be put in place to address disruption to the Lower Street car park in Stansted during the works, and

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should be required to pay compensation for the costs of disruption to use of the car park during construction.

Councillor Watson questioned whether enforcement costs currently handled by the Parking Partnership could be reduced by the Council outsourcing to an independent company. Executive Members provided figures indicating it was cheaper for enforcement to be dealt with by the Parking Partnership rather than this Council. Members overwhelmingly felt the option of using private car parking enforcement was not desirable in view of the dubious practices of many such firms.

Councillor Howell said inevitably parking enforcement was a loss-making area; that he endorsed the proposals in the report and that it was important to stand by the Council's commitment to freeze Council Tax. He echoed the view that parking enforcement should certainly not be outsourced.

The Assistant Chief Executive-Finance said the parking partnership was responsible for all parking on behalf of the Council and that it delivered a total income stream of £745,000.

Councillor Godwin said the Committee endorsed the recommendations, taking into account the changes as summarised by Councillor Barker minuted above.

SC36

ANY OTHER BUSINESS

The Director of Corporate Services said business at the next meeting would include considering the Council's budget; and that a senior police officer would be invited to attend to give Members the opportunity to put questions.

The meeting ended at 9.40pm.