

TORRIDGE DISTRICT COUNCIL

OVERVIEW AND SCRUTINY (EXTERNAL) COMMITTEE

Riverbank House, Bideford, EX39 2QG

22 July 2015 at 6 pm

PRESENT: Councillor S Inch (Chair)  
Councillors: R Darch, A Dart (attended from 6.08pm), A Eastman,  
T Johns, J Langton-Lockton, I Parker, P Pennington, A Whittle

Non Elected Representative: Mr P Topham

ALSO PRESENT: V Green – Strategic Manager (Services)  
S Squire - Democratic Services Officer

Ms Julia Lock – Chief Executive, TTVS (attended for item 6)

Dr Alison Diamond, Chief Executive NDHCT  
Mr Darryn Allcorn, Director of Workforce and Development NDHCT  
Ms Gemma Steele, Communications Assistant NDHCT  
(Dr Diamond, Mr Allcorn and Ms Steele attended for item 7)

Cllr P Hackett  
Devon County Councillor B Parsons  
Holsworthy Hamlets Councillor D Campbell

The Chair welcomed everyone to the meeting.

10. APOLOGIES

There were no apologies.

11. MINUTES

It was proposed by Councillor Whittle, seconded by Councillor Pennington and –

Resolved:

That the Minutes of the meeting held on 10 June 2015 be agreed and signed as a correct record.

(Vote: For 8, Abstentions 1)

## **Matters arising**

Councillor Pennington advised that he had not attended the Devon County Council's (DCC) Health Scrutiny Committee meeting held on the 18 June as details of the meeting were not known in time to attend.

The Chair advised that a response had been received from DCC to the letter sent concerning Springfield Day Centre. The response detailed the utility but not staffing costs. Councillor Whittle informed the committee that he had obtained the staffing cost details for Springfield and it was agreed this would be circulated to Members.

### 12. DECLARATION OF INTERESTS

Declarations of interest were made as and when the specific agenda item to which they related was under discussion.

### 13. AGREEMENT OF AGENDA ITEMS PART I AND II

There were no Part II items.

### 14. URGENT MATTERS BROUGHT FORWARD WITH THE PERMISSION OF THE CHAIR

The Chair informed Members that Scrutiny training had been arranged for Wednesday 16 September (exact timing to be confirmed).

### 15. TTVS

Julia Lock, Chief Executive of TTVS gave a presentation on the work of the TTVS. Items discussed included:

- The organisation overview – current projects, support roles and services
- Torrridge Walking for Health - how this is funded, that GP's can refer patients to it, but it is open to all and run by volunteers
- Bids for Lottery Funding and staff who assist groups with this
- That there is no charge for advice but time limits of 3 hours and 5 hours apply
- That the Volunteer Centre in Torrridge is busy with many people still preferring to call in rather than complete details online
- Currently they are assisting with finding £210k funding for different groups

Members noted that TTVS was an acronym for 'The Torrridge Voluntary Services'.

The Chair thanked Ms Lock for the work done by TTVS for community groups and for the presentation given.

16. NORTHERN DEVON HEALTHCARE NHS TRUST (NDHCT)

Councillor Parker declared a personal interest as his wife is employed by NDHCT

A document 'Decision-making criteria' was circulated by NDHCT

Dr Diamond and Mr Allcorn gave a presentation and also provided the committee with a short animated video illustrating an individual's hospital admission.

During the presentation the following was discussed:

- The need to improve health care to reduce hospital admissions and have enhanced delivery of care e.g. to reduce a hospital stay after a hip replacement from 10 to 3 days
- To adapt to national staffing shortages and take initiatives to address this
- The Acute and Community contracts
- That it is likely there will only be 2 community inpatient units in the future
- That the decision on which community hospital inpatient beds close will be based on set criteria including demography of patients in the area
- The need to build in flexibility to cope with surges on demand – Members were informed of the 'System Resilience Plans'

Members expressed concern that there would be a lack of carers in the community to provide the cover needed when the inpatient beds were closed. Dr Diamond advised that when inpatient beds were closed there would be additional investment in that community for community care.

Members also expressed concern regarding the 15 minutes time allowed for a community care visit and that this was insufficient. Dr Diamond replied that this was a joint service mainly run by Social Services.

With the permission of the chair, Devon County Councillor Parsons addressed the committee and reported that councillors were receiving mixed messages from the CCG and NDHCT. He advised that Dr Womersley had provided different information to that being given by the NDHCT.

Councillor Parsons made reference to the following:

- The 2006 Durrow Report recommending closure North Devon District Hospital
- That 40 people forming a representative group will be involved in the decision to decide which community inpatient beds to close – he suggested this was flawed and a partisan approach
- That only 2 meetings (on the 6<sup>th</sup> and 10<sup>th</sup> August) were scheduled to make the decision regarding which hospital beds should close

In response to a question Dr Diamond informed the committee that their budget was £230m, split between community and acute care.

Councillor Pennington expressed concern regarding:

- The inequalities in life expectancy between Torrington and East Devon
- That funds were being spent on an ageing population at the expense of the younger and gave an example of a mother having to travel to Bristol for treatment that was not available locally.

In response, Dr Diamond acknowledged the fundamental difference in areas and advised that many of the mental health services were not the responsibility of NDHCT.

Members were informed that each year a contract is negotiated as part of the Commissioning Strategy and population increases were included as part of this.

With the permission of the Chair, Councillor Campbell addressed the committee and advised:

- That in his previous work it had been possible to use funds from Section 106 and the Community Infrastructure Levy (CIL) towards health care.
- That the NDHCT proposals were more than closing hospital wards they were reducing the number of beds overall in the area
- That funding should be given to enhance community services before the beds were closed and not after

In response Dr Diamond reported that in Torrington 100 emergency admissions had been avoided through resources put into community services.

With the permission of the Chair, Councillor Hackett addressed the committee and reported that 2 hospitals serving his Coham Bridge Ward had closed in previous years and that with the closure of Winsford Hospital, local residents had been assured that beds would be available at Holsworthy Hospital. Councillor Hackett highlighted difficulties in provision of community care in his area, including:

- Distances between properties in the rural area
- Difficulty finding properties e.g. just a house name and post code
- 3 river bridges prone to flooding
- Inadequacies of the 111 and 999 services
- Large areas with no mobile phone coverage

There was concern that trials of the scenario and proposals being put forward by NDHCT had taken place in Cumbria and proven not to work.

The Chair thanked Dr Diamond and Mr Allcorn for attending the meeting and answering questions and for their informative presentation.

Mr Topham suggested that bringing care closer to home would be an important part of the new care service and that Members should have an understanding of what this involved. It was further discussed that the presentation had shown one aspect of the home care package and the other agencies were not considered. Reference was made to Social Services and the health and social care package.

It was proposed by Mr Topham, seconded by Councillor Pennington and –

Resolved: To contact all those involved in providing the 'care closer to home' service including third sector and other providers; to seek assurance that the 'care' element be put in place as a complete health care package; and to recommend that all sections of care and health providers work closely together to provide a holistic integrated seamless service.

(Vote: For – Unanimous)

A discussion followed which included:

- The need for social interaction and encouraging people out of their homes. This being in addition to provision of care in the home. It was noted that the recently closed Springfield Day Centre had played a part in the social interaction role.
- It was suggested there was a need to encourage people to make provision for their own old age and become more self-reliant.

It was proposed by Councillor Pennington, seconded by Councillor Eastman and –

Resolved: That TDC consults on a wider basis with all providers (including the NDHCT, North, East & West Devon Commissioning Group) and look at drawing in the Community Infrastructure Levy and S106 funds with a view to supporting the health service and to provide encouragement to all providers to cooperate in giving information to each other given the increase in demographic population of the future.

(Vote: For – Unanimous)

## 17. LOCAL INVESTMENT PLAN

The committee received a briefing note from the Strategic Manager (Services). This provided details of the background to the Devon Local Investment Plan (LIP), its vision and priorities. Members noted that the plan was nearing the end of its original timescale and that The Heart of the South West Local Enterprise Partnership (LEP) would now take the lead on reviewing and updating the LIP.

A discussion followed and Councillor Darch asked for information on outcomes from the LIP and also queried if there would be a review of the work.

It was agreed that the Strategic Manager (Services) would obtain details of outcomes and circulate this to Members.

## 18. SAFER NORTH DEVON

The Strategic Manager (Services) distributed two papers regarding Safer North Devon and advised that TDC part-fund the organisation.

Following a brief discussion it was proposed by the Chair, seconded by Councillor Pennington and –

Resolved: To form a Working Group comprising of Councillors Darch, Parker and Whittle to meet initially in August and again in September to carry out a review into Safer North Devon. With parameters to include:

- Key crime/community safety issues for Torridge
- Effectiveness of the current joint arrangements – how well are crime prevention /community safety issues addressed
- Value for money including a cost benefit analysis of TDC’s contribution in relation to service provided
- Consideration of alternative arrangements including resource requirements, desired outcomes, governance arrangements and risk

To change the date of the next External Overview & Scrutiny Committee meeting to 9 September 2015.

(Vote: For – Unanimous)

It was agreed that the Strategic Manager (Services) would make enquiries into ‘Shed Packs’ and report back to Members.

19. HEALTH, WELLBEING & SOCIAL CARE (Standing Item)

The committee noted that Councillor Betty Boundy had been appointed Lead for Health and Wellbeing / Community Safety.

This item was not discussed.

20. EXTERNAL GRANTS

Councillor Pennington declared a personal interest as he works for the CAB.

The Strategic Manager (Services) presented this report and advised Members that a Working Group was to be formed from External and Internal Overview & Scrutiny committees with 3 Members from each to work with the 2 Strategic Managers to consider the TDC External Grants.

It was proposed by Councillor Pennington, seconded by Councillor Whittle and –

Resolved: that Councillors Langton-Lockton, S Inch and A Dart sit on the External Grants Working Group.

(Vote: For – Unanimous)

21. FORWARD PLAN

The Forward Plan was duly noted.

The meeting commenced at 6.00 pm and closed at 8.45 pm

Date .....

Chair .....