

# Minutes

## Overview and Scrutiny Committee

12<sup>th</sup> October 2011



Councillors	Present	Councillors	Present
P R Barlow	Yes	W J Rose	Apologies
C A Cadman	Yes	C Sandbrook	Apologies
Dr R L Evans (Chairman)	Yes	G A Spray	Yes
S A Howell	Yes	J S Sutton	Yes
D J Louis	Apologies	J R Swift	Yes
R P Ramage	Yes		

### 14. DECLARATIONS OF INTEREST

**INFORMATION:** The following interests were declared:

- Councillor Barlow declared a personal interest in agenda item 5, Scrutiny of Transport Links and Accessibility to Health Services across the District, as a Non-Executive Director of the East of England Ambulance Services Trust, and an employee of the North Essex Partnership Foundation NHS Trust.

In accordance with the Code of Conduct, all councillors remained in the meeting for all the items and took part in the debate and decision thereon.

### 15. QUESTION TIME

**INFORMATION:** There were no questions asked or statements made.

### 16. MINUTES

**DECISION:** That the minutes of the meeting of the Overview and Scrutiny Committee held on 7<sup>th</sup> September 2011 be approved as a correct record and signed by the Chairman.

### 17. ANNUAL WORK PROGRAMME 2011-12, SCRUTINY OF TRANSPORT LINKS AND ACCESSIBILITY TO HEALTH SERVICES ACROSS THE DISTRICT

**INFORMATION:** The Chairman welcomed the following invited speakers:

Tracey Corcoran

Community Transport Manager, Braintree District Council

Rachael Price

Accessibility Planning Officer, Essex County Council

Steve Brant	Area General Manager, A&E Operations, East of England Ambulance Service
Liz McKewan,	Non Emergency Service, East of England Ambulance Service
Peter Darlington	Village Agent
Colm Seward	East Housing (support group for adults with learning difficulties).

A report from NHS Mid Essex on Access to Health Services in the Braintree District was tabled. It was agreed that members would have the opportunity to consider the report at the Committee's next meeting.

Members received a presentation on Access to Healthcare in the Braintree district from Rachael Price.

Invited speakers provided the following information in response to questions raised by members:

- The Council's Community Transport Service is beneficial for a number of people in the district eg. older people and people with learning difficulties attending hospitals. This includes attending hospitals in Suffolk. The Service provides a one way transport to hospitals for persons in the district meeting certain criteria. A return service could not be provided as this would be inefficient in tying-up a vehicle and driver for the rest of the day which could be used for other community needs;
- The Council's Community Transport Service is beneficial for a number of people in the district e.g. older people, people with disabilities, people with mobility problems, those who are rurally isolated and those who are unable to access conventional public transport services. The service can be used to access every GP surgery in the district and those bordering Suffolk i.e. Clare, Haverhill and Sudbury and Halstead and Braintree Community Hospitals. One way journeys can be booked to Broomfield and Colchester Hospitals
- Public transport services are currently provided by a commercial operator from Halstead to Braintree and from Braintree to Chelmsford. The commercial operator has advised that that it would be uneconomic for the operator to provide a direct service to Chelmsford via Broomfield Hospital. If Essex County Council (ECC) were to provide a direct service from Halstead to Chelmsford, it would run in competition with the commercial service and against ECC policies. ECC also had no evidence of sufficient demand for service direct to the Hospital;
- The East of England Ambulance Service currently provides a patient transport service to Broomfield Hospital, Braintree Community Hospital, Springfield Medical Centre and Farleigh Hospice. The service does not cover transport to GP surgeries and clinics;
- However, the East of England Ambulance Service is seeking tenders for the provision of an Essex wide Adult and Social Care Service. It is planned that this

service will provide transport to GP surgeries and clinics for eligible people assessed by medical need;

- The tender for the new service also includes a requirement for a communication strategy for the service. Also, where people did not meet the eligibility criteria, it is planned that the service will signpost people to other transport services;
- The Ambulance Service representatives considered the service to be reasonably well resourced;
- The Ambulance Service was meeting its performance targets for 999 responses in the district. The service receives a reasonably high number of inappropriate 999 calls although the NHS telephone advice service appeared to be resulting in a reduced number of those calls;
- The Ambulance Service appeared to be experiencing difficulties through the unplanned discharge of patients from hospitals. It was suggested a better pre-planned discharge of patients would help the service;
- There also appeared to be difficulties for the Ambulance Service from the offloading of patient at Broomfield Hospital;
- Some adults with learning difficulties were undertaking journeys to hospitals involving 2 buses which had caused stress for some;
- The use of Community Transport Services is restricted to 3 journeys per week whether for hospital or leisure use. As the use of the service is also beneficial to adults with learning difficulties for leisure purposes, the East Housing representative suggested that use for hospital visits be excluded for the total number of vehicle uses in a week;
- The Community Transport Service has had a targeted approach to raising awareness of the Service. Members suggested that consideration be given to how awareness might be further raised. This included raising awareness with some members;
- The use of Village Agents had grown significantly since their introduction. Agents appeared to be well accepted and are linking with a number of organisations;

The Committee thanked all invited speakers for attending the meeting and the information given. The information had given the Committee a valuable insight into transport to health services in the district and would be very beneficial to the Committee in drawing up its report.

## 19. **COMPOSITION OF TASK AND FINISH GROUPS**

**DECISION:** That the Task and Finish Groups have the following composition and Chairman:

### **1. Task and Finish Group - Local Highway Liaison**

Councillors Abbott, Allen, Barlow, Bishop, Cadman, Evans, Everard, Galione, Gibson, Ramage, Pell, Sutton, and Shepherd.

Chairman of the Group: Cllr Abbott.

## **2. Task and Finish Group - Council's General Property and Land Investment Policies**

Councillors Barlow, Baugh, Canning, Cunningham, Fincken, Johnson, Kirby, Mann, Shelton, Tattersley, Thorogood and Wilson.

Chairman of the Group: Councillor Tattersley.

**REASON FOR THE DECISION:** To agree the composition and Chairman of the Task and Finish groups.

### 20. **DECISION PLANNER**

**INFORMATION:** It was noted that ICT Contract Procurement Decision in the Decision Planner for the period 16<sup>th</sup> September 2011 to 31<sup>st</sup> January 2012 would now be taken as a Key Decision.

**DECISION:** That the Decision Planner for the period 16<sup>th</sup> September 2011 to 31<sup>st</sup> January 2012 be received and noted.

The meeting commenced at 7.15pm and closed at 9.00pm.

Dr R L Evans  
Chairman