



Cllr S Allen (Chairman)
Orton with Hampton: Cllr N North, Cllr S Scott & Cllr D Seaton
Orton Longueville: Cllr J Goodwin, Cllr P Winslade & Cllr G Casey
Orton Waterville: Cllr S Allen, Cllr G Elsey & Cllr J Stokes

DRAFT MINUTES

Of a meeting of the

Ortons with Hampton Neighbourhood Committee (Area South 2)

held on Tuesday 21 June 2011 at 7.00 pm at

The Herlington Community Centre, Orton Malborne,

Peterborough PE2 5PR

*****PLEASE NOTE THAT THESE MINUTES REMAIN DRAFT UNTIL CONFIRMED
AT THE NEXT MEETING OF THIS NEIGHBOURHOOD COUNCIL*****

Members Present:

Chairman	Cllr S Allen
Orton with Hampton	Councillors North, Scott and Seaton
Orton Longueville	Councillors Goodwin, Winslade and Casey
Orton Waterville	Councillors Allen (as Chairman), Elsey and Stokes

Officers Present:

Lisa Emmanuel	Neighbourhood Manager – South, PCC
David Marshall	Senior Neighbourhood Enforcement Officer, PCC
Jez Tuttle	Senior Engineer (Development), PCC
Javed Ahmed	South Locality Manager, PCC
Carlos Harrison	Community Based Youth Worker, PCC
Krissie Moore	Community Based Youth Worker, PCC
Gemma George	Senior Governance Officer, PCC
Dania Castagliuolo	Governance Officer (Acting), PCC
Mandy Ward	Media & Communications Officer, PCC

Also in Attendance:

Sarah Shuttlewood	Director of Acute Commissioning (NHS)
Dr Harshad Mistry	GP, The Thomas Walker Surgery
Niamh Kinglsey	Deputy Youth MP, Peterborough
Mark Bennett-Tighe	Station Manager, Cambs Fire and Rescue Service

Members of the public attended including young people from the Youth Forum and representatives of the following community organisations: Orton Waterville Parish Council, Bushfield Medical Practice, Orton Medical Practice and Herlington Community Association.

ITEM	DISCUSSION AND ACTIONS	ACTION
1. Apologies	Apologies were received from Parish Councillor Sheila Davies, Ron Nighe and Maureen Lazaretti.	
2. Declarations of Interest	There were no declarations of interest.	
3. Minutes from the previous meeting	The minutes of the meeting held on 24 March 2011 were approved as a true and accurate record.	
4. Election of Vice Chair	Councillor North was nominated by Cllr Elsey. This nomination was seconded by Councillor Seaton and Councillor North was duly elected as Vice Chairman of the Committee.	
5. Youth Forum	<p>Carlos Harrison, Community Based Youth Worker, Krissie Moore, Community Based Youth Worker and Niamh Kingsley, Deputy Youth MP for Peterborough addressed the Committee and spoke about their aims in relation to raising the public profile of young people in Peterborough. Work was undertaken with local schools in order to raise awareness of, and to get young people involved with, the Youth Forum.</p> <p>The Neighbourhood Manager addressed the Committee in response and stated that the work undertaken by the Community Youth Workers was tremendous and on the recent Herlington Community Action day several young people had turned up to help, a number of which did not even live in the vicinity. Gratitude was extended to the Community Youth Workers and the Youth Forum for all their hard work.</p> <p>Niamh Kingsley played her campaign video for the Committee.</p> <p>Councillor Scott addressed the Committee and queried the situation with the Orton Counselling Service. In response, Carlos Harrison advised that they were looking to secure the £15k needed in order to keep the service running throughout the year. Councillor Scott stated that she would contact the relevant party with regards to Orton with Hampton Ward making a financial contribution to this service. The Neighbourhood Manager also advised that Orton Community Partnership had also recently granted some money to this service.</p>	
6. NHS Peterborough	<p>Sarah Shuttlewood, Director of Acute Commissioning, NHS and Dr Harshad Mistry, GP from the Thomas Walker Surgery introduced themselves to the Committee and gave a presentation which outlined the possible ways forward with regards to the Primary and Urgent Care Strategy in Peterborough.</p> <p>The 'Right Care at the Right Time' Consultation had been launched in May 2011 and views were sought on the options contained within. The Committee was advised that brochures containing full details of the proposals had been made available on every table.</p>	

Key points were advised as follows:

- In order to face the ongoing challenges of providing primary and urgent care in Peterborough, changes would have to be made;
- The scope of the strategy was outlined and included self care under primary care and walk in centres under urgent care;
- There were certain areas which were outside of the scope of the strategy and these included NHS Direct, dentists, optometrists and the ambulance service;
- The needs of Peterborough were changing. There was a growing population with a lot of older people in the area;
- There were new communities being established within the Peterborough area with various different languages being spoken;
- Peterborough had large areas of high relative deprivation with lower life expectancies;
- GP practises would need to adapt in order to meet these changing needs;
- Current premises were affecting services and would not meet new standards going forward. This would ultimately mean that 1 in 3 patients would be affected in some way;
- A large proportion of GPs within the Peterborough area had life term contracts, therefore a strategy for retirements and contracts ending was required;
- It was currently difficult for patients at some surgeries to make an appointment, therefore this point needed to be addressed also;
- With regards to urgent care services within Peterborough, patients had reported that the system was difficult to navigate and there were too many overlaps;
- There were too many minor cases attending the emergency department;
- There were two walk in centres within the city which were duplicating the service hours at GP surgeries and it was highlighted that the City Care Centre was not utilised to its full potential;
- NHS Peterborough needed to identify extra funding for the increase in demand and for new treatments, the increasing costs and maintaining infrastructure and for repaying historical debt;
- The NHS needed to save £40m per year by 2015/2016 from its £350m budget in order to fund the service pressures;
- The vision for primary care was to move to fewer larger practices over time in order to improve quality and efficiency;
- The vision for urgent care was to provide a good emergency department and to make sure services were available;
- The development of a minor injury and illnesses unit was proposed;
- The vision outlined three different levels of care, level one primary care which incorporated home care, community pharmacy and GP practices and level two urgent care

being the minor injury and illnesses unit and level three urgent care being the hospital;

- There were three specific options being considered going forward and all of these options would incorporate:
 - Access to GP appointments by ensuring that every practice achieved a minimum standard;
 - Patient information, meaning patients would be provided with extra information in order to help them choose the right service and GP practice;
 - Working alongside smaller practices to plan future retirements; and
 - A competitive process in order to select a GP out of hours and walk in centre provider.
- There were three options highlighted within the consultation. Option three was the preferred option which would fully achieve the vision outlined for the area;
- Option one was to do nothing and option two would partly achieve the vision for the area;
- When fully implemented, it was highlighted that option three would achieve net savings of £0.8m per year;
- Benefits of the preferred option would include a larger team in a new health centre and a new minor injury unit at the City Care Centre;
- Consultation was due to close on August 18 2011 and if option three was agreed then a timetable would be followed culminating in the implementation of new health centres in North Street, 63 Lincoln Road, Hampton and Dogsthorpe in Spring 2014;
- Views and comments were sought from the Committee and attendees were advised that they could respond to the consultation in a variety of ways. Those of which were outlined to them.

Councillor Seaton addressed the Committee and questioned whether the outcome of the consultation had already been predetermined? Sarah Shuttlewood advised that it was important to know the direction of travel with such a piece of work therefore work had been undertaken prior to the consultation, however this did not mean that views going forward would not be listened to.

Councillor Seaton sought further clarification as to the situation with Hampton medical practice, as it had already stopped taking new patients. This would mean that option one, to do nothing, would not be acceptable for this particular practice alone. Dr Harshad Mistry advised that further delivery capability was sought for Hampton, however the only way to achieve this would be through expansion, as per option three.

A local resident addressed the Committee and questioned the statement which had been put forward in relation to the under-use of the walk in centre. She had known of people who had had to wait for approximately four hours to be seen. In response, Sarah Shuttlewood requested for the resident to provide her with further details of the specific time in question to enable it to be looked into. Sarah further advised that when the centre had been monitored, the average waiting time had been around two hours and a waiting time of four hours was an unusual occurrence. The

	<p>walk in centre was utilised quite a lot and its expansion and how it was used, would be looked at going forward. Dr Harshad Mistry further added that the statement had been slightly misleading in that it was the equipment held within the building itself which was underused and not the actual centre.</p> <p>Andy Slater, the Practice Manager of Orton Medical Practice addressed the Committee and stated that if Bushfield Medical Practice closed, this would lead to the loss of 225 appointments per month.</p> <p>A local resident addressed the Committee and stated that many patients were not aware of whether their injuries or illnesses were classed as minor or major. In response, Sarah Shuttlewood advised that generally members of the public were aware and further support was to be offered in order to help the public identify what facilities were available to them.</p> <p>A local resident addressed the Committee and stated that he was a patient at the Orton Medical Practice. There had been talk of the two practices in Orton closing and becoming one larger practice, of which he was supportive. If this were to happen, when would the new building be ready? Sarah Shuttlewood advised that the preferred option was for the two to come together. If this option was implemented then the new health centre at Orton would be opened during the Autumn of 2013. Patients would be contacted as soon as the decision had been made.</p> <p>Dr Rupert Bankart, a GP at Alma Road Primary Care Centre, addressed the Committee and expressed concern at the proposed practice closures if option three was implemented. There would be a gap of 80,000 appointments and patients would be more likely to attend casualty etc. In response, Dr Harshad Mistry advised that there was already current duplication occurring, with patients visiting their own GPs and then visiting the walk in centres and casualty. It was therefore unlikely that a gap of 80,000 would be a true reflection.</p> <p>Councillor Eley addressed the Committee and queried how duplication would be reduced going forward and also why would it take two years after the close of consultation to deliver a new surgery? In response Sarah Shuttlewood stated that she could not address those particular queries at the time but responses would be provided to Councillor Eley in due course. The Committee and attendees were reminded that all comments and queries would be taken on board as part of the consultation.</p> <p>Dr Cartmel, a GP from Orton Bushfield medical practice addressed the Committee and stated that Hampton's need was great and it was only going to get worse, therefore the only sensible option was option three.</p> <p>Councillor Seaton stated that in relation to the comments raised with regards to the waiting time at the city care centre, he had attended previously with his wife and they had been seen within seven minutes.</p>	<p>SS</p>
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	<p>Councillor Scott addressed the Committee and stated that Hampton's need was great therefore option three seemed the most sensible. All needs would be met in Orton and Hampton and there would be better facilities within the city centre also.</p> <p>Councillor Stokes queried whether there would be a contingency plan put in place if the development at the Orton Bushfield Practice fell through. Sarah Shuttlewood advised that the new facility had been proposed by the current landlord and if for any reason the development did fall through, the aim would still be to bring the two surgeries together.</p> <p>After further brief discussion and comments alluding to the fact that option three was the most supported option, Councillor Allen addressed the Committee and stated that consultation books were available on the tables and there was a questionnaire at the back which could be filled in and returned. As many responses to the consultation as possible were sought and all comments received would be taken on board.</p>	
<p>7. Neighbourhood Council Review</p>	<p>Councillor Seaton addressed the Committee and gave a presentation which provided an overview of the recent Neighbourhood Committee review which had been undertaken by the Strong and Supportive Scrutiny Committee. The review had been carried out between March and June 2011 and had been undertaken in order to review the process and principles of Neighbourhood Committees, taking into account what had happened during their first year of operation, in order to produce recommendations for their continued development.</p> <p>Key points were advised as follows:</p> <ul style="list-style-type: none"> • As a result of the review, a number of recommendations had been made and had been subsequently agreed at Cabinet; • One of the first recommendations had been to change the name from 'Councils' to 'Committees'; • There was a need for clearer vision in order to provide a clearer understanding to members of the public in relation to their functions; • There were three key outcomes identified, those being: <ul style="list-style-type: none"> ○ To develop and monitor Community Action Plans to address the strategic and key priorities affecting the area; ○ To establish ward forums prior to the start of meetings; and ○ To maintain Committee action plans to capture all issues raised in ward forums and meetings for follow up. • There would be a minimum of two local area tours to visit problem sites and areas of success; • The agreement that as much revenue and capital funding to support local priorities would be delegated in addition to the continued allocation of £25,000 capital budget. 	

	<p>The Neighbourhood Manager addressed the Committee and advised that the Community Action Plans were an important link to the budgetary needs of an area and ongoing action plans. Going forward, there may be the need to appoint an officer whose specific role it would be to coordinate and follow up on actions arising from the Neighbourhood Committee meetings.</p> <p>A local resident queried over what time frame the two tours would be held over. The Neighbourhood Manager addressed the Committee and stated that the two tours would take place per year and Parish Councillors would be involved.</p> <p>Councillor Winslade addressed the Committee and stated that some of the Neighbourhood Committee meetings clashed with the Parish Council meetings and the meetings held by the police. Could further coordination take place going forward? In response, the Neighbourhood Manager advised that she would look into this query and if the specific clashes could be relayed to her that would be helpful.</p> <p>Councillor Goodwin requested clarification as to how the tours would be communicated. The Neighbourhood Manager advised that this had yet to be decided, however it was envisaged that the tours would start in September and the tours were likely to be coach tours rather than tours undertaken on foot.</p>	LE
<p>8. Great Haddon Employment Zone</p>	<p>Councillor North addressed the Committee and gave an overview of the plans for the Great Haddon Employment Zone which had recently been approved by the Council's Planning Committee.</p> <p>The Committee was advised that there had been many objections received against the proposed access from the site onto the Great North Road, however Highways had stated that the road was capable of taking the traffic which would come from the site therefore if the link had not been allowed, Highways would have opposed the application.</p> <p>The site would bring in a number of jobs to the city and already a major employer, Eddie Stobarts, was looking to take over one of the units on the site to be opened in 2012. The building proposed to be taken over by Eddie Stobarts was 17 metres high and would be visible from the A1.</p> <p>Councillor Goodwin expressed concern at the building being visible from the A1 and stated that something more iconic would be better fitting as this would be the first building people would see as they entered Peterborough. In response, Councillor Seaton advised that Roxhill Development had stated that the building would be of impressive design and would stand out as a feature building.</p> <p>Councillor Scott expressed concern that a precedent had been set with regards to future housing development traffic being able to access the Great North Road. The impact that further traffic would have along this stretch of country road would be great. In response, Councillor North advised that lorries would be excluded from travelling along the road, however no impact on the road would be unavoidable. It was a main road and used to take a lot of traffic. At present the road ran at 5% capacity and it was</p>	

	<p>expected that this would increase to 40%. This was still considerably lower than other main roads.</p> <p>Councillor Seaton questioned whether traffic lights were to be implemented where the road met the A15. Jez Tuttle, Senior Engineer (Development), responded that there were no lights proposed for this location. However, there were traffic lights proposed for the housing site.</p> <p>A local resident addressed the Committee and expressed concerns at the possibility of traffic lights going up in the location mentioned by Councillor Seaton. He stated that if lights were implemented, this would cause a backlog of traffic up to Junction 6. In addition, he felt that the proposed increase in traffic flow to 40% on the Great North Road was high. Even though the road was classed as being a main road, this would be too much traffic. In response, Jez Tuttle advised that the increase in traffic to 40% would occur if the housing development was built. Early indicators of a model produced, incorporating traffic lights from the housing site, highlighted that the flow would work. However, further work would be undertaken and the application for the housing site had yet to be agreed.</p> <p>A local resident addressed the Committee and questioned whether the housing development would be visible from the A1. In response, the Neighbourhood Manager advised that there would be substantial bunding around the site, blocking any views from the A1. The Committee was advised that the housing portion of the site would be further discussed at a later date.</p>	
<p>9. Open Session</p>	<p>Mark Bennett-Tighe, Station Manager for Cambridgeshire Fire and Rescue, addressed the Committee and advised that there had been a considerable rise in arson fires within the Orton area recently. He had met with local Councillors and work was being undertaken in order to try and encourage local residents to not leave their wheelie bins in front of their properties too early prior to bin collections. Residents had also been reminded that the Council would come and collect and dispose of items such as mattresses. Going forward, local residents were requested to be vigilant and if any suspicious behaviour was witnessed, to report it as soon as possible.</p> <p>Attendees of the meeting were given the opportunity to ask questions and raise issues affecting the area in which they lived. These included:</p> <p><u>Cones along A15</u> A local resident queried how long the traffic cones, situated along a portion of the A15, would be in situ? They had already been there for a considerable amount of time and they were dangerous and posed a hazard. In response, the Neighbourhood Manager advised that she would look into this query and a response would be fed back at a later date.</p> <p><u>The Care and Rehabilitation Centre</u> A local resident addressed the Committee and sought further clarification as to the work undertaken at the care and rehabilitation centre. In response, Dr Rupert Bankart advised that</p>	<p>LE</p>

	<p>the centre contained a 25 bed rehabilitation ward staffed by nurses. The centre offered an intermediated level of care for those patients who had left the hospital, but prior to them going home.</p> <p><u>Neighbourhood Committee Budget</u></p> <p>A local resident addressed the Committee and questioned what the budget would be for the year ahead. In response, the Neighbourhood Manager advised that the capital budget for the year ahead would be £25k and at September's meeting, how this budget was to be spent would be discussed.</p> <p><u>Advertising the Neighbourhood Committee Meeting</u></p> <p>A local resident queried how the meeting was advertised. In response, the Neighbourhood Manager advised that there was a Communications Team Strategy being put into place going forward in order to advertise the Neighbourhood Committee meetings. At the current time, posters were utilised to advertise the meetings and the items to be discussed. An increase in the circulation lists to advertise the meetings were also always sought therefore if anyone wished for their email addresses to be added to the lists this would be welcomed.</p> <p>Councillor Winslade queried whether the Council's publication, Your Peterborough, was going to start being published again, as this was an excellent method of communication to residents. In response, Amanda Rose, Media & Communications Officer, advised that the publication had currently been halted due to cost issues, however she would liaise with the Director of Communications to seek clarification on this query.</p> <p>Councillor Goodwin addressed the Committee and stated that she felt the meeting was very well attended and the current methods of communication were obviously working.</p>	
10. Next Meeting	The Chairman advised that the next meeting of the Ortons with Hampton Neighbourhood Committee would take place on Tuesday, 27 September 2011 at Matley Primary School.	

Meeting closed at 8.50pm

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