Haverhill Town Council

Minutes of an Extraordinary Meeting of Haverhill Town Council's

FULL COUNCIL

Held on Tuesday 7th January 2020 at 7.30pm at the Haverhill Arts Centre, Haverhill, CB9 8AR

- Present: Mayor Councillor J Burns Councillor A Brown Councillor P Hanlon Councillor A Luccarini Councillor E McManus Councillor M Marks Councillor J Mason Councillor L Miller-Jones Councillor D Roach Councillor D Smith Councillor A Stinchcombe
- Apologies: Deputy Mayor Councillor L Smith Councillor B Davidson Councillor J Crooks Councillor P Firman Councillor P Fox
- Absent: None
- **In Attendance:** Colin Poole (Town Clerk)

19 members of the public were present.

Welcome:

Mayor J Burns welcomed everyone to the meeting and advised members of the public attending that the meeting was being recorded and explained the standing orders in relation to public speaking.

MINUTES

C20 Apologies for Absence

/001 The above apologies were noted.

C20 Declaration of Interests and requests for dispensation

/002 Councillor M Marks declared a non-pecuniary interest in item C20/004. She is Chair of the Patient Participation Group for Clements Surgery. She is also a member of the West Suffolk CCG Community Engagement Group. Councillor J Mason declared a non-pecuniary interest in item C20/004. He is a member of the Patient Participation Group for Clements Surgery

Haverhill Town Council adopted the General Power of Competence on May 14th 2019. All decisions are taken using that power unless otherwise stated.



ACTION

C20 PUBLIC FORUM

/003 See appendix 1

C20 Primary Healthcare in Haverhill

/004 Councillor A Stinchcombe provided a personal overview of the issues facing GP provision, based on a presentation previously circulated to Councillors. The information was based entirely on the latest official data published by the NHS. It was noted that this data was generally 'as at' September 2019. It was further noted that the situation in Haverhill was fluid, with new GPs starting at Christmas Maltings and Clements Practice very recently, which meant the official figures may not reflect the latest situation. Equally, it was noted that whilst the presentation focussed on the role of GPs, the primary care model in Haverhill involved a range of highly trained health professionals working alongside GPs. However, the circulated presentation proved a useful spark for debate.

Councillors noted that the funding formula used by the NHS appeared to disadvantage Haverhill. The cost of locums to backfill GP vacancies was disproportionately high. The CCG are using their powers to fund the difference to protect GP practices from the impact this expenditure might have.

Following a spirited discussion, it was proposed by Councillor A Brown, seconded by Councillor P Hanlon, that the following issues be raised in a letter to the Chair of the West Suffolk CCG, asking for action by the CCG and NHS England:

1 – A review of the GP and primary care services in Haverhill to establish whether the current commissioning meets statutory duties on reducing inequalities, ability to access health services and the patient experience.

2- A plan of action needs to be drawn up to address any shortfalls found by the review, setting a timetable for meeting objectives on achieving at least similar GP and primary care provision as the average across the CCG area.

3 – Publish a schedule for the provision of an additional health facility ("Health Hub") to include community-based secondary health care such as local X-Ray and other diagnostic services appropriate for the population size of Haverhill and the town's remoteness from a hospital, so Haverhill has equality of access to these type of services comparable to other large market towns within the CCG area.

4 – Publish a plan to urgently address the patent inequality of mental health provision for Haverhill.

5 – Publish a plan to address the lack of dental practitioners in Haverhill. **RESOLVED**

The meeting approved a press statement for the Clerk to circulate, expressing support for those who worked in the NHS.

The Mayor thanked Councillor Stinchcombe for his presentation and the work he had put into it, which provoked a lot of thought beforehand and discussion within the meeting.

C20 Date of Next Meeting

/005 MONDAY 27th January 2020 at 7:00pm, to be immediately followed by the Haverhill Community Trust AGM.

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C20 <u>Closure</u>

/006 The Mayor declared the meeting closed at 20:58pm.

Signed **Chairman** Date.....

APPENDIX 1

Resident – Representing Open Mind, A weekly drop-in safe space for anyone experiencing mental health challenges of any description, set up a year ago. Volunteers see 10 clients per week, with 160 individuals being helped over the last year. What can HTC do to rectify the lack of mental health care in Haverhill?

Councillor M Marks provided a synopsis of the NHS provisions attempted for Haverhill, noting that two workers appointed for Haverhill had subsequently left post so plans for Haverhill to be an early adopter site for a new service fell through. There is an overarching national plan for mental health services being implemented but coverage is very poor for Haverhill. There are children's mental health services, Anglia Care Trust and Turning Point provide support for issues associated with substance misuse, however with primary assessments for formal diagnosis only available in Bury St Edmunds, travel has proved problematic for people leading chaotic lives. The NHS call line 111 #2 is hoped to launch locally between May/September this year, once secondary services are in place to pick up referrals.

Councillor J Mason thanked the Open Mind volunteers for the work they do and observed that it is vital to hold N&SMHT to account for lack of services locally.

Resident - What influence does HTC have?

Mayor J Burns advised that the Council has no authority over or responsibility for health services, which are commissioned by the West Suffolk CCG. The Council can try and influence through bodies such as ONE Haverhill Partnership where we co-develop plans for health provision and the council can raise awareness through meetings such as this.

Resident – Who holds the CCG to account?

NHS England and the Department for Health and Social Security.

Resident – I work in dental healthcare and our surgery has 11,000 active patients and 7,000 non-active patients. No more patients can be seen without a significant waiting time.

Councillor M Marks expressed great concern about the lack of dental practitioners locally.

Resident – This is a perfect storm – GPs are moving on and retiring and services in Haverhill have not grown in line with the population. Councils and other bodies must take responsibility for this.

Resident – GPs choose where they want to work. We need to ensure that Haverhill is an attractive place for GPs and they are not put off by unfair reputation, and promote Haverhill positively.

Councillor M Marks – Correct - GPs are not employees of the NHS and they can choose to work wherever they want.

Resident – I work in a primary care setting. This is a national problem and we are likely to need a new model with less GPs and more specialist practitioners via a triage system. Haverhill needs a good secondary care provision with diagnostics and X-ray facilities.