

## **Community Services Committee – 2 March 2006**

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Minutes of the meeting of the **Community Services Committee** held on **2 March 2006** when there were present:-

Chairman: Cllr S P Smith  
Vice-Chairman: Cllr R A Amner

Cllr Mrs L A Butcher  
Cllr T G Cutmore  
Cllr Mrs L Hungate  
Cllr Mrs J R Lumley

Cllr J R F Mason  
Cllr J Thomass  
Cllr Mrs M J Webster  
Cllr Mrs B J Wilkins

### **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Cllr Mrs H L A Glynn and J M Pullen.

### **OFFICERS PRESENT**

R Crofts	- Corporate Director (Finance & External Services)
S Clarkson	- Head of Revenue and Housing Management
G Woolhouse	- Head of Housing, Health & Community Care
M Martin	- Committee Administrator

### **ALSO ATTENDING**

Dr P Hall	- Essex Strategic Health Authority
Ms J Fisher	- Essex Strategic Health Authority

### **79 MINUTES**

The Minutes of the meeting held on 7 February 2006 were approved as a correct record and signed by the Chairman, subject to noting that Cllr Mrs H L A Glynn had tendered her apologies for that meeting.

### **80 DECLARATIONS OF INTEREST**

Cllr J R F Mason declared a personal interest in the item on the Reconfiguration of Cancer Services in Essex – Consultation, by virtue of his role as a member of the Shadow Board for the Southend Hospital Foundation Trust.

### **81 ISSUES ARISING FROM OVERVIEW AND SCRUTINY**

The Committee considered the report of the Community Overview and Scrutiny Committee setting out a number of recommendations relating to the review of the Council's Animal Welfare Charter.

With regard to the Committee's second recommendation relating to applications for circuses, performances and the like, it was noted that it would be appropriate for delegation to be to the Corporate Director (Finance and

External Services), subject to referral to the appropriate Policy Committee, if minded to approve the application.

The Committee noted that, whilst the Council's land had not been used for circuses, this arrangement would provide officers with the scope to deal with any future application that might be made.

The Chairman of the Animal Welfare Sub-Committee advised that the amended wording for the section regarding circuses and other forms of animal display would serve as an interim measure whilst awaiting publication of the Government's Animal Welfare Bill, which might give further guidance relating to these types of event.

Members were unhappy that the wording in the preamble to the Charter had appeared to single out displays of police dogs but noted that this had not been intended and was merely used as an example. The terminology used in the Charter referred only to displays of animals.

### **Resolved**

- (1) That the amendments to the Animal Welfare Charter be agreed. (HHHCC)
- (2) That authority be delegated to the Corporate Director (Finance & External Services) to determine applications for circuses, performances, exhibitions and displays of animals on Council land or premises, subject to referral of the application to the appropriate Policy Committee if minded to approve the application. (CD(F&ES))
- (3) That the housing stock transfer process pays due regard to ensuring that tenants retain the option to keep pets in a responsible manner where this is currently permitted. (HRHM)
- (4) That a press release be issued advising that the Council has strengthened its Animal Welfare Charter. Particular reference should be made to the inclusion of issues such as animal hoarding and tethering of horses. Appropriate photographs could be added. Reference should also be made to the animal welfare section of the Council's web site. (HHHCC)
- (5) That the revised Charter be circulated as widely as possible, to include veterinary surgeries, libraries, parish councils, citizens' advice bureaux, the County Council's Cabinet Member for Localism and all Members of this Council. (HHHCC)
- (6) That a copy of the revised Charter be sent to other local authorities, commending it to them and inviting them to consider publishing their own. (HHHCC)

### 82 RECONFIGURATION OF CANCER SERVICES IN ESSEX – FORMAL CONSULTATION

The Committee considered the report of the Head of Housing, Health and Community Care inviting Members to comment on the Essex Strategic Health Authority's (SHA) proposals for the reconfiguration of cancer services and where specialist surgical centres for some of the less common cancers should be located.

The Chairman welcomed Dr Hall and Ms Fisher to the meeting who gave a presentation to Members on the various options on which views were now being sought.

In the light of the responses to the initial period of informal consultation, the SHA had shaped their proposals for formal consultation. One of the principles being used in the decision-making process was that, wherever possible, existing and planned services should be accommodated.

In respect of the cancer networks, there had been minimal support for the proposal to establish a new Essex-wide cancer network; the SHA had therefore withdrawn this model from the consultation. The consultation now centred around the configuration of cancer networks for north-east, mid, south-east and south-west Essex; the two possible options were maintaining the current networks in south Essex and mid Anglia or establishing a new cancer network encompassing the Colchester, Chelmsford, Basildon and Southend areas of Essex.

This had been the preferred option of the Community Overview & Scrutiny Committee during the first informal stage of consultation. This was also the SHA's preferred option, as it was of the opinion that maintaining the current networks would leave Essex with two of the smallest networks in the country.

In respect of Upper Gastro-Intestinal cancer, the Council had originally responded in favour of the development of two specialist surgical centres at Basildon and Chelmsford. However, the SHA had not approved this proposal as the proposed unit would cover too small a population and treat too few cases to meet national guidance. The SHA had therefore discounted this option and was formally consulting on two options, namely the development of a single, specialist surgical centre in Basildon or to develop the existing surgical centre in Chelmsford.

The Committee concurred with the SHA's preferred option to develop the existing centre in Chelmsford, as this would build on existing service strengths and expertise, and be more cost effective, whilst providing support in the south of the county.

In respect of the Head and Neck surgery, the Council had originally responded in favour of the establishment of specialist surgical centres at both Basildon and Chelmsford rather than the single site proposed. The SHA

continued to recommend the establishment of a single specialist surgical centre in Chelmsford to serve the south-east, south-west, mid and north-east Essex. No other options were being offered, as this option had strong support. Geographically, this was a central location and would be co-located with other plastic surgery and non-cancer head and neck surgery. It was envisaged that the centre could be operational within the next year to eighteen months. The Committee agreed to support this proposal.

In response to Member questions, the following was noted:-

- Whilst Southend Hospital had not yet been awarded foundation status, it was not at risk of losing any services.
- Of these less common cancers, urological would usually have the greatest number of patients per year at around 100; head and neck and upper gastro-intestinal at just under 100.
- Care would be undertaken locally where non-invasive surgery was required.
- Where an operation was carried out at a specialist surgical centre, the patient would then be transferred to their local hospital for after care.
- Enhanced communication networks would be in operation, including, for example, video linking.
- For instances of small mouth lesions, whilst the guidance was not clear, it may be possible for operations to be carried out locally.
- The provision of intensive care beds had been addressed in the Action Plan.
- Concerns about infections contracted whilst patients were in hospital were not part of this consultation; however, Members were reassured that this was always a high priority.
- Population increases, and their effect on the facilities required, would continue to be monitored.

Members agreed that the response to the consultation should indicate their concern that issues such as aftercare and transport would not be adversely affected, that excellent channels of communication would exist between the host surgical centre and the local hospital and that all necessary resources such as specialist nurses and intensive care beds should be available.

The Chairman thanked Dr Hall and Ms Fisher for attending and their expertise in answering Members' questions.

### Resolved

- (1) That the Council's response to the proposals for the reconfiguration of cancer services in Essex is to support the following options:-
  - Cancer Networks – a new network for north-east, mid and south Essex.
  - Upper Gastro-Intestinal Cancers – develop the existing specialist surgical centre in Chelmsford.
  - Head and Neck Surgery – establish a specialist surgical centre in Chelmsford to serve south-east, south-west, mid and north-east Essex.
- (2) That in supporting the above options this Council is concerned to ensure that other aspects of patient care such as aftercare and transport would not be adversely affected, that excellent channels of communication would exist between the host surgical centre and the local hospital and that all necessary resources such as specialist nurses and intensive care beds should be available. (HHHCC)

### 83 HOUSING REVENUE ACCOUNT BUSINESS PLAN – REVIEW AND UPDATE

The Committee considered the report of the Head of Revenue and Housing Management inviting Members to consider the progress being made in the implementation of the Housing Revenue Account (HRA) Business Plan 2004.

The Head of Service advised that the term 'professional witness' referred to the temporary employment of an independent person who would gather evidence of anti-social behaviour and give evidence in court. This method would be employed where problems existed in providing local residents for fear of reprisals.

The Head of Service advised the following amendments to the revised action plan:-

- Delete the reference to Housing, Health & Community Care (HHCC) on page 10.8 and 10.11 and replace with Revenue and Housing Management (RHM)
- Delete HHCC from page 10.12.

The Committee were advised that the Action Plan had made use for the first time of the traffic light system of indicating 'Progress to Date'. It was anticipated that the Government office would be pleased with the progress made to date.

### Resolved

That the update to the Housing Revenue Business Plan 2004's Action Plan be agreed. (HRHM)

#### **84 DONATION OF REDUNDANT TEEN SHELTER TO STAMBRIDGE COMMUNITY CENTRE**

The Committee considered the report of the Corporate Director (Finance & External Services) seeking Members' agreement to the donation of the redundant teen shelter removed from Sutton Court Drive Playspace to the Stambridge Community Centre.

During discussion, the following points were noted:-

- if the shelter required a base, then a planning application may be needed and would be brought before Members.
- formal consultation should take place with the Parish Council, local residents and those who attend the Youth Centre, so that an evidence base could be provided.
- should there be any issues with any of the conditions, then the matter would be brought back before the Committee.

### Resolved

That the redundant teen shelter from Sutton Court Drive playspace be donated to Stambridge Community Centre, provided they can fulfil the following requirements:-

- (1) Take full responsibility for the equipment; its collection and any planning requirement.
- (2) Demonstrate that they have consulted fully on the suitability of the shelter.
- (3) Confirm that the location is suitable for such a shelter. (CD(F&ES))

#### **85 OPENING OF POOLES LANE PAVILION AS PUBLIC TOILETS**

The Committee considered the report of the Corporate Director (Finance & External Services) seeking Members' view on a request from Hullbridge Parish Council, to re-open the toilets in the Pooles Lane Pavilion for public use.

Members agreed that both options were cost prohibitive, particularly as the facility in its current form would not be capable of providing disabled facilities without a new building.

### **Resolved**

That the request from Hullbridge Parish Council be refused. (CD(F&ES))

## **86 PRIVATE SECTOR HOUSE CONDITION SURVEY**

The Committee considered the report of the Head of Housing, Health & Community Care inviting Members to agree the provision of budget to enable a private sector housing stock condition survey to be carried out.

Members noted that in order to complete the new private sector housing strategy, following changes to the housing law due to come into effect from 6 April 2006, it was necessary to provide an adequate evidential base.

Members were pleased to note that officers were seeking opportunities for joint commissioning or undertaking the work with other Essex local authorities in order to benefit from economies of scale.

### **Resolved**

That a private house condition survey be carried out; funding to be met from the closure of accounts 2005/06. (HHHCC)

## **87 CONSULTATION PAPER ON REVISING THE MODEL STANDARDS FOR PARK HOMES**

The Committee considered the report of the Head of Housing, Health & Community Care inviting Members to agree the Council's response to a consultation paper issued by the Office of the Deputy Prime Minister (ODPM) on proposals to revise the Model Standards for Park Homes.

Officers advised that, following the consultation, once the details regarding any revisions to the Model Standards were known, it would be necessary to give detailed consideration to the revision of site licences. This could be achieved by the formation of a task and finish sub-committee.

In respect of porches, the proposals indicated that all types of porches over a prescribed length would not be acceptable, which would cause difficulties to some park home owners who had already made other alterations to meet the current standards. It was agreed that the response in this respect should be strengthened.

### **Resolved**

That the response to the consultation be as outlined in the officer's report, together with a strengthening of the response in respect of porch length to indicate that modifying the maximum length to 2 metres may cause difficulties to some park home owners. (HHHCC)

### **88 COMMISSIONING A PATIENT-LED NHS – FORMAL CONSULTATION**

The Committee considered the report of the Head of Housing, Health & Community Care on a consultation concerning the future structure of Primary Care Trusts, which had previously been considered by the Community Overview & Scrutiny Committee on 17 January 2006. Following the Committee's decision, a response had been sent to Essex Strategic Health Authority.

Despite the communication from Essex County Council, urging local authorities to re-consider their responses to the consultation and support the County's preferred option for a two PCT structure in north and south Essex, Members concurred with the view of the Overview & Scrutiny Committee.

They expressed disappointment that no provision had been made to retain a PCT for Castle Point and Rochford and in view of this the only option which could be supported, as being in the best interests of the local area, was Option 4, which proposed the establishment of 5 PCTs in mid Essex, north east Essex, south east Essex, south west Essex and west Essex.

### **Resolved**

That the Council's response to the consultation continues to be to support the proposal for 5 Primary Care Trusts in mid Essex/north east Essex/south east Essex/south west Essex/west Essex. (HHHCC)

### **89 CARAVAN SITE LICENCE CONDITIONS – UPDATE**

The Committee considered the exempt report of the Head of Housing, Health & Community Care providing an update on breaches of Caravan Site Licence Conditions.

### **Resolved**

That consideration of the report be deferred to the following meeting of this Committee, to allow further information to be included. (HHHCC)



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The meeting closed at 9.05 pm.

Chairman .....

Date .....