

North Yorkshire County Council

Richmond (Yorks) Area Constituency Committee

Minutes of the meeting held on 27 March 2019, commencing at 10.00 am at County Hall, Northallerton.

Present:-

Members:-

County Councillors Heather Moorhouse (Chairman), John Blackie, David Blades, Caroline Dickinson, Bryn Griffiths, Karin Sedgwick, Angus Thompson and Annabel Wilkinson.

Co-opted Member:-

Malcolm Warne - Communications Officer for Rishi Sunak MP.

Apologies:-

Apologies for non-attendance were submitted from County Councillors Carl Les and John Weighell OBE.

Officers:-

Andrew Davis (Area Highways Manager), Ben Dobson (Highways England), Inspector Jon Grainge (North Yorkshire Police), Steve Loach (Democratic Services), Nigel Smith (Head of Highways Operations), and Lucy Moss-Blundell (Stronger Communities); together with representatives of the Upper Dales Community Partnership and the "A Good Life" Project.

There was five members of the public and one representative of the press present.

Copies of all documents considered are in the Minute Book

36. Chairman's Introduction

The Chairman welcomed everyone to the latest meeting of the Area Constituency Committee for Richmond (Yorks).

37. Minutes

Resolved -

That the Minutes of the meeting held on 21 November 2018 and the special meeting held on 14 January 2019, having been printed and circulated, be taken as read and confirmed and signed by the Chairman as a correct record.

38. Declarations of Interest

There were no declarations of interest.

39. Public Questions or Statements

Item 3

Councillor John Watkins, Arkengarthdale Parish Council and Director of the Upper Dales Community Liaison Trust provided a statement to the meeting, highlighting the following:-

- ◆ The Upper Dales was currently facing difficult times in terms of falling numbers of young people and the sustainability of services as a result, for example the Arkengarthdale Primary School would close shortly due to lack of numbers.
- ◆ The communities within the Upper Dales now contained large numbers of older people and there was a need for appropriate housing for them.
- ◆ In view of that it was considered appropriate that housing development should be undertaken with older people in mind - providing an ability to alter premises so that they could accommodate the needs of elderly people, as well as providing specific housing for older persons.
- ◆ Providing adaptable housing would enable multiple savings to be made and enable older people to continue to live in their homes, without having to move to alternative accommodation.
- ◆ Many local community buildings were now becoming empty, due to younger people leaving those communities, and it was considered appropriate that these be put forward for adaptation for housing older people.
- ◆ It was also suggested that less emphasis be placed upon high taxation for second/third homes to help fund this venture.

A discussion of the public statement was undertaken and the following issues and points were highlighted:-

- ◆ The issue was a significant problem in North Yorkshire in terms of a rising, aging population and decreasing services and access to health care in some area. The Local Development Framework for District Councils could take account of this and it was stated that the Yorkshire Dales National Park Authority was campaigning in this respect.
- ◆ A Member, also a Director of the Upper Dales Community Liaison Trust, highlighted the need for such development with a growing number of elderly people either moving into, or wishing to remain, in the Upper Dales area. The issue of housing provision for older people was important and using former community buildings, such as Arkengarthdale School, to provide good quality, sustainable housing for elderly people would be important going forward.
- ◆ A Member noted that Hambleton District Council were attempting to address this matter through their Local Plan. He noted that education, churches and housing were all significant issues in all area and the challenge to District Councils was how to accommodate an aging population and how to better use former community buildings to assist this. He noted that developers were reluctant to build bungalows, therefore, a different approach was required to the use of former buildings, although, he noted that there had been some success in terms of developing new bungalow accommodation of late. He also expressed concern regarding the effect that academisation was having on smaller rural schools with them not fitting into the requirements of many of the multi academy trusts.
- ◆ A Member acknowledged the issues raised within the statement and agreed that design for buildings enabling them to be adapted to accommodate people in later life should be incorporate into the Local Development Framework.
- ◆ The Chair highlighted the additional care housing schemes that were being developed in the area which assisted with the accommodation of older people.

40. Stronger Communities - Community Showcase

Considered -

The report of the Stronger Communities Delivery Manager (Richmondshire), Lucy Moss-Blundell, providing Members with an update on the Stronger Communities Programme linked to the priority area of older people and care, and showcasing the work of a key delivery partner organisation in the Richmond constituency area - the Upper Dales Community Partnership (UDCP).

The report highlighted the key directives for the Stronger Communities Programme as follows:-

- ◆ Reduced inequalities.
- ◆ Improved social connectedness.
- ◆ Improve social, physical or emotional well-being.

The report provided an update on the four priority programme service areas:-

- ◆ Libraries.
- ◆ Community transport.
- ◆ Children, young people and families.
- ◆ Services for older people and adults.

The key focus for the community showcase was services for older people and care in the Upper Dales through the “A Good Life” scheme developed through the Upper Dales Community Partnership.

The Executive Chairman of the Upper Dales Community Partnership, County Councillor John Blackie, was invited to provide a background to the Partnership and introduce representatives of the “A Good Life” project.

County Councillor Blackie highlighted the following:-

- ◆ The Community Partnership was started by Councillor Blackie in 1997 to provide local services locally for the benefit of local communities.
- ◆ Initially the Upper Wensleydale Community Office was open five days per week to provide those services and was supported by Richmondshire District Council.
- ◆ Since 2005 North Yorkshire County Council had become the key partner and the Upper Dales Community Partnership had been created.
- ◆ The Partnership now operates the following services:-
 - community office
 - Police Station
 - library
 - internet café
 - Little White Bus
 - Post Office - also two branch Post Offices
 - Dale Head Community Filling Station.
- ◆ The Partnership now had a turnover of around £2m, was a not for profit community enterprise, all Directors were volunteers, there were 25 employees of local people and around 70 volunteers (mainly in relation to driving the Little White Bus). The Partnership was seen as a vanguard for local community enterprises and had national recognition.

Item 3

- ◆ The Partnership was set up to respond to the needs of local communities and provide services as required. These were all provided for the benefit of local communities.
- ◆ The provision of services had enabled Hawes to keep hold of its younger population and thereby ensure that the local school remained sustainable. The provision of local services via the community hub was important to this sustainability.
- ◆ There were still issues that required addressing within the Upper Dales local communities and, with the assistance of the Stronger Communities Programme, the Upper Dales Community Partnership would continue to address these.
- ◆ The “A Good Life” project had been assisted by Stronger Communities to develop self-reliance and independence for older people in local communities within the Upper Dales, basing that upon the nature and openness of the residents within those communities. The project sought to engage with other local projects to the benefit of local residents.

Representatives of the “A Good Life” project outlined the following:-

- ◆ A Good Life Project - Research
 - Survey of residents in Upper Wensleydale and Swaledale to ascertain the current provision of services and facilities available and experience.
 - Paper-based and online survey undertaken October 2018 to January 2019.
 - Drop-in cafes held at Hawes, Askrigg, Muker and Bainbridge.
 - 222 responses.
 - Ideal target age range 40 to 80+ years.
 - Good geographic spread of responses.
- ◆ Gender
 - Male - 33%
 - Female - 66%
 - Prefer not to answer - 1%
- ◆ Age Group

Under 18	0.48	1
18 - 24	0.48	1
25 - 29	0.95	2
30 - 39	3.81	8
40 - 49	8.57	18
50 - 59	16.26	35
60 - 69	28.37	61
70 - 79	23.26	50
80 - 89	17.21	37
90+	0.93	2
- ◆ Do you worry about having to leave the Dales due to lack of facilities/services?

Yes	46%
No	54%
- ◆ Are you a carer?

Yes	17%
No	83%

◆ Why do you love living in the Dales?

- The scenery.
- Having been born here.
- Peace and tranquillity.
- Quality of life (currently).
- Family around them.
- Fresh air and lack of traffic.
- Work.
- Friendliness of community.
- Feeling of safety.
- Relaxed way of life.

◆ If you felt lonely, or you needed help, would you know what help was available to you?

Yes 43%
No 57%

◆ What local services do you currently access?

Parish Council	34%	72
Gardening Services	16%	34
Caring Services	4%	9
Cleaning Services	14%	30
Sport/Exercise Club	21%	44
Social Club	11%	23
Doctors	95%	204
Little White Bus	32%	69
Community Office	34%	73
Church/Chapel	56%	120
Band	11%	23
Choir	22%	46
Drama Group	4%	8
Book Club	9%	19
Other	34%	73
Local Amenities eg Market Hall or Auction Mart	40%	86

◆ Do you have any needs/difficulties that are not being met?

Yes 26%
No 74%

◆ Are there any activities/hobbies that you enjoy that you are not able to access?

Yes 42.60 72
No* 54.40 97

* 18 of the "No" responses are qualified "only with the ability to drive making access possible" making future reality potentially 80 "Yes" and 81 "No".

- ◆ What could the community do to help you?
 - Affordable decent size houses.
 - Information on ways that people can help/volunteer within the community.
 - Local drop-in social centre + collection services (voluntary and funded).
 - Carer service - out of hours led by nurses.
 - Run the buses more frequently and not have to book in advance.
 - Build a leisure centre and swimming pool.
 - Better public transport is the key, not relying on others who may or may not be available.
 - Develop car sharing and a buddy system.

- ◆ Would you be willing to help the community in some way?

Yes	60%
No	26%
Maybe	14%

- ◆ Do you already volunteer within your community?

Yes	60%
No	40%

Following on from the initial presentation the following issues were raised:-

- ◆ The initial phase of the project had been developed alongside a national programme and, as such, had developed national context. It was hoped that the project would be utilised as delivering local solutions to local issues, which could be transferred into national scenarios. It was hoped that significant change could be developed from the project.
- ◆ The purpose of the project was to try and develop existing services to work better for older people.
- ◆ Through the project it had been discovered that a great many of issues were already been addressed in the Upper Dales and a co-ordination of their delivery would be of great benefit to local residents.
- ◆ Areas of concern related to transport and access to additional services.
- ◆ A number of workshops, involving leading organisations that worked with older people and groups and voluntary organisations operation in the Dales, had taken place to develop the project.
- ◆ The next stage would be to reconvene the groups for further sessions to develop views on how to address the issues that had arisen in the survey and to better develop communication between service delivery organisations to enhance that service provision. This would have to happen at grassroots and top levels and would involve the various levels of the Health Service.

County Councillor Blackie provided a summary of the project and what had been taking place in relation to that as follows:-

- ◆ The aim now was to take the project forward and funding had been sought to extend its life for a further 12 months.

Item 3

- ◆ A good base had been developed through the initial phases of the project, but this had outlined a number of concerns that required further consideration. Access to NHS services had been a major issue outlined. The project had assisted in co-ordinating the various authorities into changes being made to patient transport services and funding for minor injuries, through the CCG, in the Upper Dales. This ensured that a better access to NHS services could be obtained, than was being proposed by the various NHS Commissioners.
- ◆ He stated that he was proud of the partnership, how it was operating and of the “A Good Life” project and what that was delivering. He praised the Stronger Communities Programme provided by North Yorkshire County Council and the benefit that that was bringing to local communities.

Further to the community showcase Members raised the following:-

- ◆ The Chairman concurred with the praise given to the Stronger Communities Programme and to the “A Good Life” project. She commended the Upper Dales local communities for the work they had undertaken to make sure the project was being delivered.
- ◆ A Member noted that the questionnaire around the “A Good Life” project had also been undertaken in the Lower Dales, in her electoral division, with good feedback from the Leyburn area. She emphasised that it was good that local communities were working together and that communication throughout the area was important to ensure that the projects worked effectively for all local communities involved. She stated that it had been good to work with the project leaders on this.
- ◆ It was asked whether Parish Councils were involved in the communication process for the project. In response it was stated that the Upper Dales Community Partnership involved representatives from all of the local Parish Councils as well as from the District Councils and North Yorkshire County Council. The key to its success was community ownership and hence the involvement of local Parish Councils.
- ◆ A Member congratulated the Upper Dales Community Partnership for the work that it had undertaken to date and suggested that this was a model that should be developed across the whole of North Yorkshire and countryside.

Resolved -

That the contents of the report and the community showcase be noted.

41. Rural Policing

Inspector John Grainge, North Yorkshire Police, gave a presentation on the current work of North Yorkshire Police’s Rural Taskforce, highlighting the following:-

- ◆ The Rural Policing Team now had 17 members of staff.
- ◆ The Team worked alongside Neighbourhood Policing Teams to provide a co-ordinated approach to tackling crime in rural areas.
- ◆ The Team delivered on three key areas - prevention, engagement and enforcement.

Prevention

- ◆ Operation Woollen - this focused on crimes taking place in relation to farms in the area, with around 2,000 farms being situated within the constituency.
- ◆ Operation Woodchip - this focused on rural businesses and the crime taking place in relation to those.
- ◆ Operation Crucible - focus on metal theft, working alongside Historic England.
- ◆ Operation Harvester - this allows local communities to be involved in the rural policing process, utilising volunteers to enhance the detection of crime, particularly cross-border crime, enabling police resources to be used more effectively.

Engagement

- ◆ Intelligence and reassurance strands - utilising a national intelligence model to drive activity and understanding needs effectively to target crime appropriately.
- ◆ Events attended - the Taskforce attended events throughout the area providing an opportunity to give advice and gain intelligence from larger numbers of people.
- ◆ Use of communication tools - WhatsApp is now being used as a communication tool for the Team alongside other social media, radio and TV. WhatsApp is particularly well used in rural locations and is excellent for sharing messages quickly and providing photographic evidence of crimes taking place.
- ◆ Feeds activity - community reserves and enhanced communication tools were assisting with the development of initiatives in rural areas and helping to improve relations between the Police and local communities.

Enforcement

- ◆ Operation Extractor - a large number of rural crimes had been taking place involving burglaries from dwellings and outbuildings with tools, valuables, off-road bikes, quad bikes, etc being taken. The crime was being committed by a group from the Cleveland area and there had been a number of arrests, with the investigation into this matter ongoing. There had been a large number of crimes in respect of this since August 2018, however, there was significant ongoing work in tackling this matter and it was expected that further significant arrests and convictions would follow shortly.
- ◆ Operation Light - this related to crimes taking place in the Upper Dales, west of Richmond spreading into the southern Dales around Skipton, Grassington, etc. The crimes were being undertaken by a group from West Yorkshire and resources were being put together to target this. Again there had been a number of arrests and the investigation was ongoing with further arrests and convictions expected as a result.
- ◆ Recent wildlife prosecutions - poaching remained an issue in the area, however, there had been significant reductions since 2015/16 but work would continue to address the situation. Volunteers and other policing teams were being utilised to address wildlife crime and this was working effectively. Action being taken included the seizing of vehicles and seizing of dogs used for such crimes. It was emphasised that care had to be taken when seizing dogs to ensure that common sense was applied to the situation and that costs did not become too prolific in terms of undertaking this.

Item 3

- ◆ Operation Eyeball - addressing a number of crimes alongside other agencies, such as local authorities, for example fly tipping. Information gained in relation to such crimes often led to the detection of other crimes and was vital to the work of North Yorkshire Police.

Following the initial presentation a number of issues and points were raised during discussions with Members:-

- ◆ Members were keen to have further information regarding the operations taking place to address significant crime, which was of major concern to their local communities. In response Inspector Grainge outlined the type of crime that was taking place, with outbuildings being targeted in particular, and expensive equipment, quad bikes, vehicles, etc being stolen. He stated that every effort was being made to address this matter, but there were some gaps in intelligence that were required to be addressed, particularly in relation to where some of the stolen produce was ultimately being sold to, prior to full scale action being undertaken to arrest those involved. He noted that much of the intelligence related to identifying people having knowledge of the crimes taking place, rather than pinpointing specific crimes to specific individuals, as there was a much stronger likelihood of obtaining a conviction through that. He emphasised that arrests continued to be made and that every effort was being taken to ensure that the crimes were being addressed and the culprits received effective sentencing.
- ◆ A Member noted that legislation had been brought in, in relation to addressing the scrap metal situation, and given the issues around Operation Crucible, it was asked whether that legislation was working effectively. Inspector Grainge noted that the Scrap Metal Dealers Act was in place, however, there were still ways around that legislation, which continued to see criminal activity related to that.
- ◆ Issues around how fly tipping was dealt with differently on public and private land were discussed. It was noted that, in terms of private land, the responsibility for clearing the fly tipping was with the landowner, which was unfair, as the criminal act had been committed against them. It was noted that the matter was being considered, nationally, with a view to making the situation fairer for landowners. Inspector Grainge highlighted the work undertaken in relation to fly tipping, alongside local authorities, under the Environmental Protection Act. He noted that some tipping was on an organised basis and made a great deal of money for those involved, many of whom were also involved in other criminal activity. He highlighted the action that was undertaken to ensure that this matter was being addressed effectively.
- ◆ The Co-opted Member stated that the local MP, Rishi Sunak, had received a great deal of correspondence in relation to thefts of machinery, quad bikes, etc and had queried whether the co-operation of Cleveland Police to address these crimes had been sufficient. In response Inspector Grainge stated that the majority of incidents were taking place in North Yorkshire and were for North Yorkshire Police to investigate. He noted that Cleveland Police had different priorities, which also required addressing, however, he emphasised that they had co-operated well with North Yorkshire Police to address this. There had been good collaboration between the two Police Forces involving both intelligence and resources in terms of investigating these crimes. He noted that there was a good working relationship between the two Forces and this showed in the work being undertaken in relation to this matter. In response to requests by Members Inspector Grainge stated that he would report back to the Committee to provide updates on prosecutions that had taken place in respect of Operation Extractor.
- ◆ A Member emphasised the need to expand communication where possible and noted that many of the Parish Council meetings within her electoral division did not benefit from the attendance of a Police representative. She emphasised that it was beneficial for them to attend as two-way communication could only assist with the detection of crime in the area. Inspector Grainge agreed and stated that he would obtain details

Item 3

from the Member with a view to ensuring that appropriate Police presence was in attendance at Parish Council meetings. The Member stated that this need not be at every meeting, but could be advertised for one or two meetings per year to ensure that those who wished to communicate with the Police could be in attendance at those times. Members also stated that liaison with the National Parks Authorities, in a similar vein, would be beneficial. On a similar issue a Member raised concerns regarding Parish Councils agenda timings in terms of the attendance of Police representatives. He suggested that better meeting management would assist their attendance as, on many occasions, he had witnessed Parish Councils undertaking long items of business, with the Police representative left to wait, rather than being out in the community. Members concurred with this view and suggested that better agenda management at Parish Council meetings would help address this.

- ◆ A Member noted that a number of surveillance cameras had been erected in his local area and asked who had responsibility for these and what they were for. In response the Inspector stated that cameras could be erected for a number of reasons, including API cameras erected by North Yorkshire Police or for traffic monitoring by North Yorkshire County Council, for intelligence gathering, etc.

Resolved -

That Inspector Grainge be thanked for his presentation, the contents of which be noted and further updates be provided to subsequent meetings of the Committee.

42. Strategic Highways Network

(i) A19 and Surrounding Network - Ben Dobson, Highways England

Mr Dobson stated that he was a Contract Manager for Highways England with responsibility for the A19 network, including the improvement of safety for those using the network.

Mr Dobson provided the following presentation:-

A19 Network - Central Reserve Gap and Junction Safety Improvements

- ◆ Map details of the works being undertaken to improve the safety of central reserves gaps and junctions from North Yorkshire northwards were provided.
- ◆ Details of the works taking place in the North Yorkshire section were outlined.
- ◆ Confirmed works for 2019/20:
 - Stony Lane - April/June 2019
 - Elwick and Dalton Piercy - July/September 2019
 - Mount Grace Priory - October/December 2019
 - Norton to Wynyard - January/March 2020
- ◆ 2020 Onwards:
 - Options study assessing improvements (grade separated junction to grade separated junction, use of historical incident data, traffic movements, non-motorised users, consider the impact on local communities).
 - Analysis of series of measures (improve lining and signing, junction improvements, gap closure, grade separated junctions).
 - Improvements prioritised at regional and national level for value for money.

Following the presentation a number of issues and points were raised during discussions with Members, as follows:-

Item 3

- ◆ The Chair emphasised the need to ensure that funding was directed to the most appropriate areas, highlighting that the Coast to Coast Walk was about to become designated as a national trail and would require access across the A19 in respect of this. The Committee's Co-opted Member noted that the local MP, Rishi Sunak, had been pursuing this matter for a while and it was expected that the Coast to Coast Walk would become a national trail in 2021. He emphasised that a safe crossing across the A19 would be required in terms of the designation of the route. In response Mr Dobson stated that he was aware of the issue and expected further consultation and consideration of this matter, going forward. He suggested the designation of the route as a national trail would benefit the case for the provision of a dedicated crossing.
- ◆ A Member noted that when incidents occurred on the A19, traffic tended to be diverted through Northallerton via satellite navigation systems and he wondered whether anything could be done to prevent this as it caused major disruption to local communities. Mr Dobson stated that there was little that Highways England could do change how satellite navigation systems were set up in terms of their algorithms although details were regularly discussed with satellite navigation providers. He stated that every effort was made to try and lessen the impact on local communities when major routes such as the A19 were required to be closed, however, it was inevitable that there would be some disruption when this occurred.
- ◆ A Member referred to a recent incident on the A1 where temporary fencing had blown down and caused travel disruption along that route. In response Mr Dobson stated that, although he was not responsible for the A1, he would take the observations back to the appropriate team with a view to preventing this from re-occurring.

Resolved -

That Mr Dobson be thanked for his presentation, the contents of which be noted

(ii) Management, Upkeep and Maintenance of Highways in the Constituency

The County Council's Head of Highways Operations, Nigel Smith and Area Manager - Area 1 (Richmond) and Area 2 (Thirsk) Offices, Andrew Davis gave a presentation outlining the following:-

- ◆ Overview/review of service delivery
 - Area Offices in Brompton on Swale and Thirsk with satellite depots in Stokesley and Leyburn.
 - Area Office roles within Highways and Transportation - network strategy/highway operations - 7 Area Offices/Commercial Services Unit
- ◆ Maintenance of the highway network
 - Devolution and development of roads in North Yorkshire.
 - Early macadam road.
 - How and why roads deteriorate - drainage problems/inadequate design or depth of construction/use of inappropriate or substandard materials/overstressing due to changes in traffic patterns of excessive loading/frost damage/ground movement at depth such as mining subsidence/settlement due to consolidation of weak sub-grades/public utility activities.
- ◆ Carriageway Condition
 - As new.
 - Aesthetically impaired.
 - Functionally impaired.

- Structurally unsound.
- ◆ What makes for a good maintenance regime?
 - Network condition assessment - existing methodology.
 - Surveys of the classified network undertaken each year.
 - Bi-annual surveys of the unclassified network.
 - Prioritisation based on road condition and road category.
- ◆ Current maintenance regime
 - Reactive maintenance 2018/19.
 - Keep the network safe.
 - Repair dangerous potholes (temporary or permanent repair).
 - Assessment of any winter damage repairs necessary.
 - Permanent repairs can be undertaken as minor patching programmes.
 - Utilisation of a variety of methods, processes and materials.
- ◆ Planned maintenance 2018/19
 - Identify programme of work.
 - Larger schemes including repair and reconstruct.
 - More permanent works ensure longevity of repairs.
 - Supplemented by additional £13m from Government in November 2018.
 - Programme of maintenance work reviewed with Tour de Yorkshire/UCI route announcements.
- ◆ Planned and reactive maintenance spend across Richmond and Thirsk areas
 - 18/19 capital spend - approaching £10m (includes additional allocations from Government £13m pot).
 - 18/19 revenue - approximately £2.3m.
 - 19/20 capital - already £7.5m work allocated/programmed.
 - 19/20 revenue - similar to 18/19 plus inflation.
 - Members/Division - specific information being discussed at current round of Area Office Member/Officer meetings.
- ◆ Longer term plans
 - Reduce life cycle costs.
 - Defined levels of service.
 - Ability to track performance.
 - Further improved transparency and decision-making.
 - Ability to predict the consequences of funding decisions.
 - Decreased financial, operational and legal risk.
 - Ability to discharge statutory financial report and responsibilities.
 - Carriageway infrastructure asset management plan approved by BES Executive Members.
 - New methodology being deployed for identifying schemes/allocating funds.
 - Increased network surveys - 100% annually as opposed to bi-annually.
 - Funds allocated by condition/network length/treatment type in each area.
 - Greater ownership and collaboration between teams regarding treatment types and the road network.
 - Aim to reduce strain on revenue budgets by identifying locations with repeated need for intervention and allocating capital funds.
 - Asset integrity project.
- ◆ Winter maintenance
 - NYCC winter service - climatic domain map.

- 36 Priority 1 and 2 routes across Richmond and Thirsk areas.
 - Area 1 routes.
 - Area 2 routes.
 - Treatment facts and figures.
 - Over 1,400 km of network treated in Areas 1 and 2.
 - Gritters undertaking a typical 24 hour treatment travel over 4,000 km.
 - Resilience in salt barns with replenishment throughout the season.
 - Fleet maintained and operated by Ringway.
 - Fleet also supplemented by farming contractors.
 - Deployment figures 2014/15 to 2018/19.
- ◆ Summary of the 2018/19 winter treatment season
- Has not been of significance when compared with previous seasons.
 - Has still required deployment of perhaps more gritters/treatments than may have been anticipated.
 - Is likely to result in reduced expenditure relative to previous years.
 - Still produced some more typical conditions around December and January.
- ◆ Tour de Yorkshire 2018/19 - Looking back
- May 2018 - NYCC led on highways and traffic management planning and delivery of the Tour de Yorkshire starting in Richmond and the route through Richmondshire and Hambleton.
 - The race visited the area over two days taking in Catterick Garrison, Leyburn, Coverdale and Middleburn in Richmondshire and Bedale, Morton on Swale, Northallerton, Thirsk and Sutton Bank in Hambleton.
 - Once again the race was a huge success with large crowds lining the route and extensive global TV and media coverage.
 - Forward highway maintenance programmes were co-ordinated to accelerate some planned maintenance schemes on the race route.
- ◆ Tour de Yorkshire 2019
- Even bigger year for events in Richmondshire and Hambleton with both the Tour de Yorkshire 2019 and 2019 UCI Road World Cycling Championships taking place.
 - Bedale to host a Tour de Yorkshire finish and both Northallerton and Richmond hosting starts of UCI Road World Cycling Championship events.
 - Traffic management planning well underway and the forward programme of highways works was again being managed to deliver works in advance of both events.

Following the initial presentation a discussion was held with Members and the following issues and points were highlighted:-

- ◆ The Chairman stated that communication was a major factor in ensuring that local communities were aware of the activities taking place in relation to highways in their areas. She noted that, of late, there had been some issues around information coming back from Highways, despite previous good performance in relation to this and requested that this matter be addressed, so as not to cause major concerns. She stated that Members were available to help Highways Engineers in terms of communicating with local areas and would assist where possible with that two-way communication to ensure that issues did not arise in relation to that.
- ◆ A Member made reference to two incidents of flooded roads recently in his area following heavy rainfall, which appeared to have been caused by run-off from adjacent fields. He noted that this was a regular occurrence and asked whether Highways were able to address the situation as the roads were often blocked in view of this. In response the Head of Highways Operations stated that this was more of a

Item 3

challenge in rural areas when water was running off adjacent land to the highway. Attempts had been made to provide drainage on such land by the provision culverts, but this had to be undertaken alongside the landowner and with their permission. He stated that he would look at the specific sites detailed by the Member and determine what action could be taken to mitigate the situation. He would provide feedback to the Member in relation to that.

- ◆ A Member noted that a recent media report had indicated that the road from Patrick Brompton to Leyburn had stated that signage was required to indicate that the road was slippery because of the condition of the surface. She asked when that matter was to be addressed and whether resurfacing would be taking place accordingly. The Area Highways Manager stated that he would check the maintenance programme and respond to the Member in relation to that.
- ◆ It was noted that Members from Richmondshire would be meeting with Area Highways Officers on 5 April and 1-1 sessions would be available in terms of issues to be raised.
- ◆ A Member raised concerns regarding the recent arrangements for traffic movement in relation to the development taking place at the North Northallerton site, with particular issues of concern for the residents of Brompton in terms of traffic management during recent months. He highlighted a number of issues that had created difficulties for local residents and asked whether lessons had been learnt from those issues. In response the Head of Highways Operations stated that he would require specific details to understand the concerns raised. He noted that this was a major development which was likely to take a longer period of time in terms of highway disruption and alternative traffic routes, however, he would consider the specific issues provided to him and discuss those with local Members and the Area Highways Manager to determine those. He would then provide a response to Members in relation to those issues.

Resolved -

That the Area Highways Manager and the Head of Highways Operations be thanked for their presentation the contents of which be noted.

43. Issues of Note in the Constituency Area

- (a) **Friarage Hospital - Special Meeting of the Area Constituency Committee - Tuesday 9 April 2019 at 3 pm in County Hall, Northallerton**

Resolved -

That the arrangements for the above mentioned special meeting be noted.

44. Work Programme

Details of the current suggested Work Programme for the Committee were provided for Members to discuss. It was stated that the Committee would consider significant local issues which were of strategic importance, allowing them to influence those issues through consideration of those matters.

It was noted that the Work Programme was subject to slippage from time to time and, therefore, Members were invited to submit issues of local concern that could be utilised for meetings when the Work Programme slipped.

A Member suggested that the issue of cyber-crime and scams be added to the Work Programme for future consideration.

Resolved -

That the Work Programme, and the additional item highlighted, be noted and that item be placed into the Work Programme accordingly.

45. Next Meeting

Resolved -

That the next ordinary meeting of the Area Constituency Committee take place on Wednesday 12 June 2019 at 10 am in County Hall, Northallerton.

46. Other Business - Communication from Local MP, Rishi Sunak

The Co-opted Member extended the thanks of local MP Rishi Sunak to the Area Constituency Committee for their support in his campaign to bring the Red Arrows to RAF Leeming.

Resolved -

That this be noted.

The meeting concluded at 12.30 pm

SL/JR

North Yorkshire County Council

Richmond (Yorks) Area Constituency Committee

Minutes of the special meeting held on 9 April 2019, commencing at 10.00 am at County Hall, Northallerton.

Present:-

Members:-

County Councillors Heather Moorhouse (Chairman), John Blackie, David Blades, Caroline Dickinson, Helen Grant, David Hugill, Carl Les, Karin Sedgwick, Angus Thompson, John Weighell OBE and Annabel Wilkinson together with Co-opted Member, Malcolm Warne.

In Attendance:-

County Councillor Jim Clark - Chair of Scrutiny of Health Committee.

Officers:-

Adrian Clements (South Tees Hospitals NHS Foundation Trust), Dr James Dunbar (Clinical Director, Friarage Hospital), John Darley (Hambleton, Richmondshire and Whitby Clinical Commissioning Group), Mark Hodgson (Hambleton, Richmondshire and Whitby Clinical Commissioning Group), Helen Edwards (South Tees Hospitals NHS Foundation Trust) and Steve Loach (Democratic Services).

There was seven members of the public and one representative of the press present.

Copies of all documents considered are in the Minute Book

47. Chairman's Introduction

The Chairman welcomed everyone to the meeting and reminded those present that this was a County Council meeting held in public, not a public meeting, therefore only members of the public that had registered to speak would be invited to do so.

She noted that issues raised at the meeting would be fed back into the County Council's Scrutiny of Health Committee, which was leading the County Council's consideration of the issue, and that the Chair of the Scrutiny of Health Committee, County Councillor Jim Clark, was present in relation to that.

48. Declarations of Interest

There were no declarations of interest.

49. Building a Sustainable Future for the Friarage Hospital, Northallerton

Adrian Clements of the South Tees Hospitals NHS Foundation Trust, together with Dr James Dunbar, Clinical Director for the Friarage Hospital, Mark Hodgson, Hambleton, Richmondshire and Whitby CCG and John Darley, Hambleton, Richmondshire and Whitby CCG, gave a presentation in relation to "Building a Sustainable Future for the Friarage Hospital, Northallerton", which highlighted the following:-

Temporary Change to Service

- ◆ Escalating risk
 - Daytime Consultant Critical Care cover.
 - Out of hours Consultant cover to Critical Care.
 - Resident anaesthetic cover.
- ◆ February 2019 - Board decision based on patient safety - in order to prevent an unplanned site closure requiring an emergency evacuation of all in-patients.
- ◆ March 27 2019 - moved to preferred model on a temporary basis.

Public Engagement

- ◆ 11 events held around the area between October and December 2017.
- ◆ From this a number of Clinical Steering Groups were established - emergency care/critical care/acute medical admissions/surgical pathways.
- ◆ Objective - how to build a sustainable future for the Friarage maximising local access while maintaining safe in-patient care - started development in March 2019.

Proposed Sustainable Model

- ◆ Urgent treatment centre - national specification - open 24 hours a day/seven days a week.
- ◆ Ambulatory emergency care - exemplar - to remain unchanged.
- ◆ Surgery - elective and day case.
- ◆ Anaesthetist on site to 9 pm.
- ◆ Medical admissions - Monday to Friday 08.30 to 18.30/Saturday and Sunday 08.30 to 16.30.
- ◆ Designed by the Friarage Team.
- ◆ Reviewed by the Clinical Senate.
- ◆ Innovative and sustainable.
- ◆ Developed in January 2019.

What does this mean for the population served?

- ◆ Three patients move during the daytime.
- ◆ Five patients move out of hours.
- ◆ One elective complex surgical patient to James Cook.
- ◆ 90% of patients still have their care delivered at the Friarage site.

What does this mean?

- ◆ Consultants at the front door of the hospital.

- ◆ Maintenance of an acute hospital that does not rely on 24/7 anaesthetic cover.
- ◆ Broadening of offer to include treatment of children with minor illnesses as well as minor injury.
- ◆ Maintenance of safe, innovative, locally accessible but sustainable services.
- ◆ A model that can confidently be recruited to.

“We believe that through an unbelievable amount of effort and hard work by the doctors and nurses at the Friarage, they have come up with a solution that fulfils the vast majority of needs of the population in a sustainable way” - South Tees NHS Hospitals Foundation Trust.

Early Implementation of New Model Temporarily

- ◆ Due to issues outlined a new model was implemented, temporarily, on 27 March 2019.
- ◆ A great deal of work had been undertaken to ensure that this was working effectively.
- ◆ All patient movements had been monitored over the days since this had come into place and compared against data from April 2018. The following figures were outlined:-
 - April 2018 - 364 attendees to emergency department.
 - April 2019 - 371 attendees to urgent treatment centre.
 - Over 100 children had used the urgent treatment centre since 7 April 2019, a significant rise as children could not be seen at the emergency department previously.
 - There had been a decrease in direct admissions at the Friarage, but 17 patients had been repatriated from James Cook Hospital since 7 April.
 - There had been 32 fewer admissions.
 - James Cook Hospital had seen an increase of around 24 patients to its emergency department.
 - There had been negligible additional effect on Darlington Memorial Hospital.
 - Details from the Yorkshire Ambulance Service corroborated this.
- ◆ The move to an urgent treatment centre had been established previously and was awaiting a formal consultation. Due to the current circumstances the model had to be implemented on a temporary basis, however, it was intended to carry out a consultation in terms of the implementation of an urgency treatment centre in due course.
- ◆ The aim was to ensure that the hospital remained sustainable and that risks were diminished.

Item 3

- ◆ There had been a number of positive patient stories submitted following the move to the urgent treatment centre, however, there was an awareness that there were likely to be opposite views also.
- ◆ The main reason for the immediate changes to services were to ensure patient safety.
- ◆ The new arrangements would continue to be monitored and reviewed, going forward.

The Clinical Lead for the Friarage Hospital, Dr James Dunbar, addressed the Committee highlighting the following:-

- ◆ He reiterated that the urgent care centre model had been worked up by the Friarage Hospital but had needed to be implemented before the consultation due to the circumstances outlined.
- ◆ He noted that should this not have been put in place then the Friarage could have been left as a cold site which, in the long term, could have been unsustainable for the future of the hospital provision.
- ◆ The arrangement appeared to be working well currently as had been detailed.
- ◆ He emphasised that the major issue currently was the political circumstances around the future of the hospital and reports indicating that its future was in doubt, as that affected the recruitment. He stated that the recruitment of appropriate personnel was highly important to the future of the hospital and it was expected that the model implemented would assist this.

Mark Hodgson of the CCG outlined the following:-

- ◆ As a local GP he considered that the new system was working well and saw the implementation of the model as an appropriate solution to what could have been a serious issue. He considered that the model was a viable option that would provide a healthy future for the Friarage Hospital.

John Darley of the CCG highlighted the following:-

- ◆ He had noted the response of the Yorkshire Ambulance Service which had been excellent in terms of assisting the new model. Transfers were being undertaken on a timely basis and there was no evidence of additional pressure on the emergency department at James Cook Hospital. The new system appeared to be working efficiently and effectively.

Following the initial presentation Members of the public who had registered to speak were invited to do so and the following issues were raised:-

Mr Brian Forbes, local resident, outlined the following:-

- ◆ The current debate was focused on the decision to downgrade A&E services to an urgent care centre.
- ◆ This had been done without public consultation.
- ◆ What had been presented was on the face of it a reasonable compromise solution given the recruitment problems South Tees claim to have faced.
- ◆ He felt it important to stand back and look at the services that the Friarage had been downgraded or lost over the years in paediatrics, maternity, mental health and A&E.

Item 3

- ◆ The trend appeared to say that the future was predictable.
- ◆ The net overall effect was a significant loss of services which was being justified by South Tees on the basis of safety, sustainability and integrated health care.
- ◆ The combined efforts of the three local authorities, two MPs and general public had failed to prevent the loss of services.
- ◆ It seemed unlikely that the past could be changed and the interpretation of the word “temporary” could be debated but there needed to be a strategy for the future.
- ◆ He suggested, therefore, that a joint statement from those who democratically represent the public view was overdue.
- ◆ The statement should be made to the CEO of South Tees NHS Trust and the accountable officer of the combined North Yorkshire CCGs and should relate to the cumulative down grading and loss of service at the Friarage. He considered it may be appropriate to copy the CEO of NHS England and the Secretary of State for Health into the statement.
- ◆ In view of the issues raised he asked whether the Committee was prepared to pursue agreement to and the production of a joint statement from the Lead Member of North Yorkshire County Council, Hambleton and Richmondshire District Councils and the MPs for Richmondshire and Thirsk and Malton.

Holly Wilkinson addressed the Committee and outlined the following:-

- ◆ Based on broken promises made by the South Tees Trust during the merger in 2002 and the consistent cuts to locally accessible emergency health care services, does the Committee not agree that the only way to establish the transparency needed regarding the national and decision-making process to the recent drastic cuts to the hospital was a Judicial Review, to establish the lawfulness of these changes that appear to have been pushed through due to the scheduled departure of one consultant.
- ◆ Why has the South Tees Trust Management not entered into a public consultation long before the crisis situation was allowed to happen.

Mr Harry Hiscock addressed the Committee and outlined the following:-

- ◆ Mr Hiscock provided details of his son’s recent illness and experiences in relation to that.
- ◆ He noted his son’s illness had started with sickness and diarrhoea.
- ◆ Although he seemed to recover it became apparent that he was still unwell and later in the same week became in severe pain with an ambulance having to be called.
- ◆ The ambulance crew arrived and was asked where they were going to be taking his son. In response it was stated that would not be taken to the Friarage as they would not see him there and was offered only James Cook or Darlington.
- ◆ The ambulance crew also pointed out that James Cook was very busy and it would be better if he was taken to Darlington.
- ◆ The consultant met the family at Darlington and stated that they would carry out some investigative surgery by putting a camera into his son to find out what was wrong.

Item 3

- ◆ The camera could not fit into his son's gut because of inflammation and it was found that the issue was a burst appendix and also an abscess which had burst.
- ◆ The team at Darlington had to extract everything out of his son's gut and wash and clean the organs to get rid of the infection, unfortunately some of the infection had already been absorbed into his body.
- ◆ As a result he caught sepsis and it was found out that Darlington were not equipped to deal with this.
- ◆ Later on the same day a specialist team from the Royal Victoria Infirmary in Newcastle were sent down to accompany his son to Newcastle where he was in intensive care for four days leaving a 60 mile journey from home for Mr Hiscock.
- ◆ After two weeks and two days in the Royal Victoria Infirmary his son returned home.
- ◆ Mr Hiscock considered that, on this occasion, his family had been lucky, however, he wondered if the changes were putting people at risk because of delays to treatment and diagnosis.
- ◆ The consultant at Darlington had said that in over 30 years this had been one of the worst cases she had seen.

Adrian Clements responded to the issues raised by Mr Hiscock. He noted that with the complications outlined and with James Cook and Darlington unable to give the level of care required, the specialist unit required to undertake that care was based at the Royal Victoria Infirmary at Newcastle. With the level of illness outlined he was certain that the Friarage would not have been able to accommodate Mr Hiscock's son and he would have been transferred directly to other more specialist units and probably onto the Newcastle RVI from there. It was emphasised that should the James Cook Hospital have been the correct facility then his son would have been treated there.

In relation to his statement Mr Hiscock asked how the Ambulance Service could decide that there were too many people waiting at a specific hospital and transfer a patient to an alternative.

In response it was stated that there were fewer patients coming to James Cook currently and additional Ambulance Service resources were in place to accommodate expected additional journeys. Mr Clements emphasised that he had not been made aware of any delays at James Cook Hospital following the transition date. He emphasised that the new model was still in its early days but every effort was being made to ensure that there was no adverse effect on patients from these changes. He again emphasised that the nature of the issue outlined required the patient to be moved to the most specialist centre available.

Mr Darley from the CCG outlined the additional resources that had been provided to the Yorkshire Ambulance Service to assist in the Northallerton area in line with the implementation of the new model of service.

Item 3

Following the public questions/statements Members were invited to discuss the matter and the following issues and points were raised:-

- ◆ A Member raised concerns regarding the substantial development taking place in Catterick Garrison, with 900 additional homes being built for thousands of military troops expected to be located in that area. She also noted the additional housing being built in Northallerton and other local areas. She wondered whether the balance of available local health services was appropriate given the large additional numbers of people that would be coming into the area, and given that Darlington and James Cook Hospitals were already over capacity. She noted that minor injuries unit funding in her area had been removed, including Catterick Garrison, which would further compound the problem. She noted that everyone had to go somewhere in an ambulance to receive medical attention from her area and she was not sure how, with the new model in place, the facilities could cope.
- ◆ In relation to the issue raised in respect of the minor injuries unit at Catterick Garrison, representatives of the CCG stated that consideration was being given to accommodating patients in Richmond practices and emphasised that there was adequate provision currently available. The Member stated that she considered the arrangements in place to be inadequate and noted there would be a significant delay before any new arrangements were put in place to address this. The Member emphasised that a special case had been made for areas in the Upper Dales for their minor injuries funding to remain in place and considered that, with the influx of people, Catterick Garrison and the surrounding areas should also be considered as special cases. In response it was stated that figures indicated that the Upper Dales minor injuries units were used more frequently than those in the Catterick Garrison and it was emphasised that usage attracted funding. It was considered, therefore, that when more people moved into the area additional usage of facilities may attract additional funding and enable those facilities to be enhanced. The Member stated that she hoped this would be the case as that had not been so previously.
- ◆ A Member asked whether the Friarage had received an equal input into the development of the new model, or whether, being the larger hospital in the South Tees Trust, the James Cook Hospital had been given a greater influence on how things were developed. In response it was stated that as the Director for the Friarage Hospital on the Trust Board, Mr Clements, had ensured that the Friarage had been fully represented in meetings to discuss the way forward. He noted that when he had initially joined the Board he was aware that there appeared to be a bias towards the James Cook Hospital and that the two hospitals were treated as two separate entities. Since then he had ensured that both facilities were identified as one hospital, at two sites. He noted that there had been substantial support for the Friarage Hospital, and utilising it appropriately, from the Board. The Chief Executive Officer of the South Tees Trust Board was fully aware of the importance of the Friarage and the services delivered through that facility. Everyone was aware of the circumstances that had arisen and the need for the immediate introduction of the urgent care unit. Dr Dunbar reiterated the issues outlined by Mr Clements and emphasised that he was correct in stating that there was full support for the Friarage Hospital on the Board and that the two hospitals were treated as a single entity. He noted the four working parties that had been established to determine the way forward for the Friarage, as detailed in the presentation. He noted that the work undertaken had revolved around ensuring the Friarage was sustainable and could be retained as a purposeful, fully functional hospital serving the local community. The new model would allow that to happen. Difficulties had arisen in terms of recruitment, which had led to the current situation, which was why the model had been developed. He noted that before its introduction it had been hoped to go out to consultation, however, circumstances had determined that this be introduced prior to that, to ensure the safety of patients. There was a determination from the Board to ensure that the Friarage Hospital did not become a cold care site, which was why the model had been brought in. He stated that it would

Item 3

be difficult to revert to the model of delivery prior to this, as there was insufficient staff to be able to provide that, therefore, every effort would be made to ensure that the Friarage remained sustainable through the arrangements now in place, as recruitment was more likely to a viable hospital rather than a cold care site.

- ◆ The Member who raised the question emphasised that the Friarage had never been designated as a stand-alone hospital, but was always seen as being a satellite of the James Cook Hospital, and considered that the Friarage should have always been part of the package of delivery for the South Tees Trust. In relation to this Dr Dunbar stated that without the support of the James Cook Hospital the Friarage would have run into similar circumstances to those that had arisen, leading to the new model being implemented, many months ago. He noted, however, that different skills were required within the Friarage Hospital to those at the James Cook Hospital with a more general level of knowledge required within the Friarage as opposed to specialist knowledge in James Cook Hospital. Support had been offered from James Cook to assist service delivery at the Friarage but there was insufficient available to maintain the levels of service for the full range of services that had been in place previously. Efforts had been made to maintain the status quo for around 6-9 months, but this could not be undertaken any longer. The Board recognised that there was a danger of the Friarage completely failing if efforts continued to maintain full services, therefore, action was undertaken to deliver something different to prevent this becoming a cold site. It was noted that the Friarage was the smallest acute care provider in the country and also had the smallest critical care unit in the country, therefore, the new model was required to ensure the sustainability of appropriate facilities.
- ◆ A Member asked, given the requirement for additional emphasis of intensive care at James Cook, whether that would free up space to provide additional day care facilities at the Friarage and see those type of admissions being increased to ensure the viability of the Friarage. In response it was noted that elective procedures had risen at the Friarage and, given the redirection of services, it was more likely that further opportunities for such procedures would be provided. In relation to this it was noted that a new surgical block would be of significant assistance, ensuring that the Friarage remained viable, however, that would be dependent upon funding being made available to develop those. Representatives of the hospital and the CCGs noted that the new model allowed the development of additional services within the Friarage to ensure its viability. It was considered that the development of the model would allow for more patients to be treated at their local hospital in terms of day surgery and day care facilities.
- ◆ A Member stated that as a frequent patient at the Friarage Hospital the care offered to him and by the Yorkshire Ambulance Service had been first rate and the thanks of everyone from the rural communities in his electoral division, for the excellent work delivered by the Friarage Hospital, was passed on by him. He stated he had a number of issues to raise which he outlined as follows:-
 - In terms of the minor injuries unit funding there had been a welcome u-turn by the CCG in terms of the provision for the Upper Dales. He could not understand, however, why Leyburn and Colburn had not been included in that u-turn. He noted the issues outlined earlier in the meeting with relation to Catterick Garrison and called for a rethink on the provision of minor injuries funding for GPs surgeries in those areas.
 - Noting the issue raised by the father of the seriously ill child, earlier in the meeting, he asked why the Ambulance Service had determined where the child was to be taken to, rather than taken to the clinical decisions unit at the James Cook Hospital for them to consider what action was required. He did not expect this to the decision of the Ambulance Service.

Item 3

- He noted the issues raised by Adrian Clements in terms of providing new facilities at the Friarage and suggested he contact the local MP with regards to the additional funding being provided to the Health Service by Central Government for consideration of a share of that to provide those facilities.
- Around five years ago, when the Friarage was operating a full accident and emergency unit, a decision was made not to allow minor injuries for children to be undertaken there. It seemed absurd that minor injuries to children could now be considered at the Friarage following the re-designation to an urgent treatment centre.
- He noted that since 2003 he had been considering health issues on behalf of the County Council in some format or other. At that time there were 300 in-patient beds at the Friarage, which now stood at 120 or less. In that time many other services had been lost including maternity and paediatrics. He wondered why the Darlington Memorial Hospital was able to sustain these services, when the Friarage could not. Given the close proximity to Darlington he could not see why they were able to recruit to positions ahead of the Friarage.
- He noted that, as a representative on the North Yorkshire County Council's Scrutiny of Health Committee, he was aware that consideration was being given to a three hospital model for the area, with the Friarage being one of the hospitals designated within those proposals. He considered that the move to the current arrangements were at odds with what was being proposed. He stated that the issue of the three hospitals model had been mooted for some time and wondered whether this would ever come to fruition.
- He noted that the model currently in place at the Friarage had been considered back in 2017, following work with the various workshops, and he wondered why it had not been felt appropriate to put the matter to consultation as soon as the details had emerged, rather than having to introduce this as a temporary measure, without the consultation having taken place.

Responses to the issues raised were provided as follows:-

- ◆ An explanation was provided as to the current arrangements regarding where patients were sent to in terms of being admitted to hospital after certain times. In terms of the Friarage it was noted that a determination would be made as to which hospital was the most appropriate and that would be determined on meeting the needs of the patient most appropriately. A consultant would make that decision. It was hoped that the offer at the Friarage would be extended in future if staffing was in place appropriately, however, currently there was insufficient appropriate staff available to accept all admissions after certain times, safely. It was noted that people would be admitted to the Friarage if it was safe to do so, however, if appropriate staff were unavailable then patients would be taken to James Cook or Darlington Hospitals and, when appropriate, would be brought back to the Friarage at a suitable time. It was emphasised that every effort was being made to expand the workforce with appropriate staff to ensure that the Friarage could accept patients more readily in future in terms of critical care.
- ◆ In terms of capital investments it was stated that the Friarage would be considered for those, if services could be enhanced, but it was also noted that James Cook Hospital also required capital investment and it would be ensured that the best value for money was obtained from any additional funding provided.
- ◆ It was stated that the implementation of the new model was not a down grading of services, as the accident and emergency department at the Friarage had not been functioning accordingly for a number of years and the new model enabled a service

Item 3

enhancement through a multi-hospital approach. It was noted that the acute medicine unit had also been enhanced through the new arrangements.

- ◆ In terms of Darlington being able to keep all its services it was noted that all the hospitals in the area were facing similar difficulties, which was why the three hospital solution was being sought, with a view to encouraging recruitment and retention for appropriate staff. Work was being undertaken throughout the health community to find an appropriate solution for the area and it was noted that the Friarage Hospital was included as part of that solution.

Members continued their discussions with the various representatives and further issues and points were raised as follows:-

- ◆ A Member raised concern that, with additional ambulance journeys required to get patients to the appropriate hospital and facilities, the infrastructure in the area had to be of an appropriate quality to ensure that those journeys were not delayed in any way and he was unsure that this was the case. He also noted that during the winter months it was often seen that ambulances were queuing at hospitals, with patients waiting three to four hours to be taken out of the ambulances, because of accident and emergency units being overstretched. He considered that having smaller hospitals helped to reduce the burden on the larger hospitals at such times and envisaged significant problems, going forward, when the accident and emergency facilities at small hospitals were lost.

In reply it was stated that the response times for the Yorkshire Ambulance Service had now changed with the minimum emergency response being cut from eight minutes to seven minutes. In relation to this a Member emphasised that the issue he raised did not relate to the ambulance getting to the patient, but the amount of time taken to transfer to the nearest hospital. It was noted that to increase the speed of onward conveyance sufficient ambulances were required and there had been heavy investment in the Ambulance Service across Yorkshire to improve that. The investment in the Service would provide additional levels of paramedics within ambulances to assist with immediate care and the additional ambulances would ensure that patients were being transported to the most appropriate site in the most time effective manner. It was noted that national standards for response were being delivered, however, every effort was being made to further improve the service.

In relation to the issue raised regarding the major hospitals operating at capacity it was noted that this was of concern, however, the South Tees Hospitals Trust did well in relation to this, with national standards being met appropriately, as ambulances were being met with a consultant. This led to priorities being dealt with immediately and ambulances not queuing, although, it was acknowledged that, occasionally, there were extremely busy times. It was emphasised that the new arrangements had not had as much impact on James Cook Hospital as expected and it was hoped that this would continue, as plans were made for the next winter period, when there would be more pressure on the Health Service in general.

- ◆ It was noted that the air ambulance was a major contributor to the provision, particularly in rural areas. Yorkshire Ambulance Service staff were used as personnel for the air ambulances as a contribution to the overall service, which was operated on a charitable basis.
- ◆ A Member asked what would happen should both James Cook Hospital and Darlington Memorial Hospital be full in terms of where patients would be taken to. In response it was noted that James Cook Hospital had never been closed to ambulances previously and would only be done so as a last resort, as it was classified as a major trauma centre. There was no incentive for Yorkshire Ambulance Service to go to an alternative site unless directed to do so by a clinician. It was noted that the current arrangements provided a platform for both James Cook Hospital and the

Item 3

Friarage to develop appropriately, with the Friarage being the urgent treatment centre, with consultants supporting that. It was expected that, going forward, the strategy would lead to a sustainable future for both hospitals and an enhanced service being provided. It was noted that clinicians decided the most appropriate site for patients to be transferred to, depending upon their needs.

- ◆ A Member suggested that there was a need to support the decision made in terms of the temporary arrangements, and moving forward into the consultation for these being made permanent, as the arrangements were developed through working groups established by the hospital. Recruitment would be enhanced by ensuring that the two hospitals could move forward on a sustainable basis. Negative comments in relation to this would hinder that sustainability.

The Chairman asked the Chair of the Scrutiny of Health Committee, County Councillor Jim Clark, to comment on the issues raised, and he outlined the following:-

- ◆ He stated that he welcomed the information provided and would take those issues back to the Scrutiny of Health Committee for further consideration.
- ◆ He noted that the Friarage Hospital had been a major issue of consideration for the Scrutiny of Health Committee for a number of years now and considered that the model currently in place, temporarily, should be taken forward for public consultation. He noted that previously, when services had altered at the Friarage, for example paediatrics and maternity, no consultation had taken place.
- ◆ As part of the process he emphasised the need for the three hospital solution to be considered, with the James Cook Hospital, the Friarage and the Darlington Memorial Hospital providing that solution. Once a decision had been made to pursue that solution then decisions could be made as to which services were provided where. He acknowledged that this was a complicated matter due to the reorganisation of the Health Service in general, and issues in terms of resources and recruitment for the CCG.
- ◆ He stated that he was looking forward to the public consultation commencing and emphasised the need to ensure that people engaged with this. It had to be ensured that the people who lived in this area had access to appropriate hospital facilities, within an acceptable distance, to meet their needs. He noted that the hospitals covered a large rural area, and although the Friarage Hospital was a small facility, the Health Service was a national service and it was important that people's requirements were fulfilled wherever they were located.
- ◆ There was a need to deliver good or better services for North Yorkshire and the consultation process would provide details as to how those could be developed.
- ◆ He noted that the Scrutiny of Health Committee would take great interest in the consultation and hoped that it would provide an opportunity for local communities to influence that service provision.

The Chairman thanked everyone for their attendance at the meeting and for the information provided.

Resolved -

That the information provided in relation to "Building a Sustainable Future for the Friarage Hospital, Northallerton" be noted and the details of the discussions held at this meeting be forwarded to the Scrutiny of Health Committee to assist them with their further consideration of this matter.

The meeting concluded at 4.55 pm

SL/JR