

## KIRKBURTON PARISH COUNCIL

### MINUTES OF THE EXTRA PARISH COUNCIL MEETING HELD AT BURTON VILLAGE HALL, Highburton on Thursday, 9 June 2016 at 7.30pm

PRESENT: Cllr R Burton in the Chair

Cllrs H Abid, M Ackroyd, B Armer, S Beresford, A M Boden, R Bray, P Brook, J Cowan, P Cunnington, L Holroyd, B McGuin, J Paxton, J Sykes, M Sykes and J Taylor.

In attendance: Mrs L Gardner and Mrs A Royle.

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| <p>Apologies were received from Cllrs R Barraclough, R Franks, D Hardcastle, P McGleenan, C Rowatt and P Scott, the reasons for which were accepted by the Council. Cllr C Walker was absent.</p>  | <p><b>43 Apologies</b></p>   |
| <p>No interests were declared.</p>   | <p><b>44 Declarations of Interest</b></p>  |
| <p>A member of the public addressed the Council on the subject of the Grange Moor Allotments.</p>  | <p><b>45 Public Participation</b></p>  |
| <p><b>Resolved:</b> To hold all items in the public session.</p>   | <p><b>46 Admission of the Public</b></p>   |
| <p>Members considered the public consultation on proposed future arrangements for hospital and community health services and were unanimously opposed to the proposals, which represent a significant decrease in the existing level of care.</p>  | <p><b>47 Proposed Future Arrangements for Hospital &amp; Community Health Services</b></p> |
| <p><b>Resolved:</b> To lodge strong objections to the proposals (cc to the local MP's) on the following grounds:</p>   |  |
| <ul style="list-style-type: none"> <li>• Greater Huddersfield and Calderdale each require emergency provision given the number of residents and the vast geographical catchment areas.</li> <li>• The consultation does not appear to have more than one option for people to choose and it is concentrated on financial considerations rather than patient needs and services.</li> <li>• There is no indication of the outcome if the one option is not agreed.</li> <li>• The presentation pack does not include any financial or statistical information to support the claims made.</li> <li>• There is no evidence of prior consultation with key stakeholders such as West Yorkshire Ambulance Service or Clinical Commissioning Groups of neighbouring NHS Trusts.</li> <li>• There are particular concerns whether patients living in rural areas in the Parish would be able to receive adequate treatment in a timely manner, given the extremely long journey to Halifax.</li> <li>• There is insufficient recognition of the challenges created by the topography of the Greater Huddersfield and Calderdale districts, and no coherent strategy to address these challenges. It is feared that those living in the Parish and furthest away from Halifax would be most affected. These problems mean that the journey times would be unacceptably long, which could be critical to the patient.</li> <li>• There is no reliable means of public transport from the Parish area to Calderdale Hospital, especially if patients and their families needed to travel in the evening and at night-time. What public transport is available is also expensive, especially if relatives were required to visit on a daily basis.</li> <li>• The increased journey times would make it difficult, if not impossible for the West Yorkshire Ambulance Service to meet response target times. It may be that on some occasions all the ambulances would be in Halifax, leaving none available to support the population in the Parish.</li> <li>• There are also specific concerns about the site of Calderdale Hospital and there are queries whether it is indeed possible to expand the building, given its design, its land-constrained location and the fact that the car park is already too small to cope with the existing volume of vehicles.</li> </ul> |  |

- It is possible that patients over the far side of the parish may use hospitals outside the Calderdale and Greater Huddersfield Clinical Commissioning Groups areas instead. However, there are concerns that the impact on adjacent hospitals in Dewsbury, Wakefield, Barnsley, Oldham etc are not addressed in the proposals and there are no reassurances that these hospitals could serve additional patients. There should therefore be a co-ordinated approach across all of those areas, rather than each CCG making proposals in isolation and with no reference to its colleagues in neighbouring areas.
- The Right Care, Right Time, Right Place policy claims to move services closer to the users but the proposals in this public consultation appear to do just the opposite and come at a time when GP and other health services are facing cuts.
- If an acceptable level of health care is to be provided, there needs to be a multi-agency approach to care, rather than one proposal being considered in isolation of the wider health services in the area.

**47 Proposed Future Arrangements for Hospital & Community Health Services (Cont'd)**

The Chairman then closed the meeting.