

Health and Healthcare and Local Authorities

1 Health and Healthcare

A new Primary Care Trust for the whole of Cornwall and the Isles of Scilly was established in October 2006, this replaced the North and East Cornwall PCT that previously commissioned and provided healthcare services for the population of Bude/Stratton. The new Primary Care Trust has established a county-wide user strategy group to drive strategy for Patient and Public Involvement. The group includes representation from the community and voluntary sectors, the Patient and Public Involvement Forum and Overview and Scrutiny Committees.

A three-month engagement programme called the 'Strategic Review of Health Care Services' was undertaken by the new PCT as soon as it was established to assess current services, needs and views and help develop a clear health strategy. A number of different engagement and communication methods were used as part of the review enabling over 1000 people to contribute in various ways including:

- public meetings
- questionnaires - electronic and hard copies
- select committee style hearings held across the area
- radio, letters, e-mails, by telephone

The strategic framework - the plan for future health services - includes an objective to continue to engage fully with local communities.

In July 2007, the Chief Executive of the Cornwall and Isles of Scilly Primary Care Trust reported as follows: North Cornwall is one of the largest districts in England and is very sparsely populated, although the population is steadily increasing. It is less deprived than more western parts of Cornwall. Indicators of health are generally good compared with England. While average male life expectancy in North Cornwall is similar to the England average, women, on average, live longer than in England as a whole.

Over 2,500 of North Cornwall's children live in households dependent on means-tested benefits. Early death rates from cancer are lower than the England average and falling. Teenage pregnancy rates are low compared to the England average, although there are higher rates in some local areas within North Cornwall. Although the death rate from smoking in North Cornwall is low, smoking still kills around 170 people every year. The rate of road injuries and deaths is high. Around 70 people die or are seriously injured on the roads of North Cornwall every year. The percentage of people with recorded diabetes in North Cornwall is higher than the England average.

Although increasing physical activity is vital to maintaining and improving good health in the future, it is not widespread in North Cornwall - only around 1 in 8 of the district's adults undertakes the recommended amounts of physical activity.

Patient and Public Involvement

From April 2008 Local Involvement Networks (LINKs) will replace existing Patient and Public Involvement Forums in order to strengthen and extend the influence local people have on health and social care services. These networks of service users, voluntary organisations, community groups and members of the public will be established and supported by independent 'host organisations' commissioned by local social care authorities. Cornwall County Council has a statutory duty to make contractual arrangements with a host organisation, on receipt of money from the Secretary of State for Health. The County Council contract commencing on 1 April 2008, is with the CRCC.

Public Health Issues: Bude and Stratton

The rate of population rise in Bude is above the average for Cornwall, while that in Stratton is below that average. South west Bude has higher percentages of pensioner households and households without cars than the county average. It scores lowest in the area in terms of the percentage of people describing their health as "good". East Bude has a markedly higher proportion of single parent households than both elsewhere in the area and the county average. All areas in Bude and Stratton have a lower than average percentage of households having two or more cars than the county average. During 2007 the PCT nominated a Public Health specialist to link directly to the Bude Partnership.

Stratton Hospital

Stratton Hospital is thought to be the second oldest community hospital in the United Kingdom, having opened its doors to the people of North Cornwall in 1866. Today, it has 17, GP-run inpatient beds, a nurse-led minor injuries unit, and departments for X-Ray, therapies and outpatients. The hospital is relatively isolated, being 28 miles from the nearest hospital trust in Barnstaple.

The hospital is sited at the top of a hill adjacent to the medical centre, and abutting a busy main road. The site has little room for expansion and would benefit from more parking spaces. It would also benefit from more storage space for the often large pieces of equipment frequently in use in modern community hospitals. The previous North and East PCT drew up a number of capital schemes for the hospital, but was unable to take the proposed development forward.

The hospital works collaboratively and innovatively with Holsworthy Hospital (8 miles distance in the North Devon Healthcare Trust area) to ensure that services are complementary and not duplicated. For example, Stratton has an X-Ray department while Holsworthy does not; while the latter has a visiting care of the elderly specialist while Stratton does not. Patients from both sides of the border, therefore, sometimes make the short journey across the Tamar to access the service that they need. The hospital is well supported by an active and dedicated League of Friends. The Friends have raised large amounts of money that has gone to improve the fabric of the building, and been used to purchase clinical equipment and comforts for patients.

The area has two GP practices – Stratton Health Centre and Neetside. The former has six partners, has some 13,200 registered patients and is long-established in the town. Neetside is a single-handed practice celebrating its second birthday in 2007 and has 1,500 registered patients. Currently based in the community centre, Neetside Surgery will move to the Methodist Hall during August/September 2007, where there is more space.

The Primary Care Trust has held an exploratory meeting with a private sector partner interested in providing a continuing care retirement village in the Bude area. In liaison with the local GPs, the Primary Care Trust is exploring whether this provides potential for a one-stop service. The Primary Care Trust is actively considering the primary care facilities required at Stratton, and how these sit alongside other priorities across the county. This prioritization process will be concluded by September 2007.

Out of Hours Services

The Primary Care Trust is aware of concerns about out-of-hours access in the Bude/Stratton area. Kernow Urgent Care Service is in the process of meeting with the local GPs with the aim of attracting more of them to work for the service and so improve local access. Serco is also further developing its reciprocal arrangements with partner providers such as Devon Doctors to ensure that the best use of all services is made to provide timely care for people in north and east Cornwall.

NHS Dentistry

The Craig Practice, which had NHS dental surgeries in Bude and Camelford, terminated its NHS contract on the 31st March 2007. The PCT went out to tender to replace the NHS provision in both towns and received expressions of interest from seventeen potential providers of which five were short-listed. Oasis Dental Care won the contract.

Oasis Dental Care has purchased the existing 2 surgeries from the Craig Practice and has also recruited most of the dentists who had worked there previously. Thus, most patients were able to have continuity of care and be able to see their previous dentist. The NHS provision re-commenced in June 2007. Oasis Dental Care have agreed to take on those patients who were NHS patients in the Craig Practice previously, and opened up their list to new patients. Although the list was not expected to be open for long, it provided some much needed access to routine NHS treatment for patients in an area of high need.

2 The Local Authorities

At the time of going to press: Cornwall has a three-tier structure of local government, consisting of over 200 Parish and Town Councils, 6 District Councils and Cornwall County Council. The Isles of Scilly have their own unitary authority. This will change as Cornwall becomes a Unitary Authority in April 2009. It is believed that Bude will be a flagship (pilot) Community Network Area for the new Cornwall Council, being set up in November 2008.

At present, Cornwall County Council provides services which require coordination at County level and its powers include: Education, Social Services, Transportation and Estates, Libraries, the Fire Brigade, Trading Standards, Public Footpaths and Registration of Births, Deaths and Marriages.

Similarly, at present, North Cornwall District Council provides services and has powers to control: Local planning, Housing, Council tax, Electoral Services, Economic Development and Regeneration, Refuse Collection and Environmental Health.

2.1 Parish Councils

The Parishes were formed at a time when there was little difference, to the local people, between the Church and the State. A parish usually formed around a village or other small community and used to be centred around the Parish Church. Today Church and State have separated but the same area is now represented as a local authority by the Parish Council and the Church of England by the Parochial Church Council.

The Parish Councils are responsible to the council County of Cornwall in which it is located. The Parish Councils have few major rights and/or obligations, they do however manage local amenities and have a watching brief on local issues and their opinion is noted by those higher authorities in matters concerning them such as local planning issues. As described elsewhere, they are invited to develop Parish Plans.

2.2 Bude-Stratton Town Council

Bude-Stratton Town Council was created following local government reform in the early 1970's when district councils were created. Post 1974 local government is administered at three levels; County, District and Town/Parish, but this will change in the next year or so as the county changes to a Unitary Authority.

At present, Bude-Stratton Town Council owns, manages and leases out certain properties on behalf of the local electors, these include: The Castle (recently refurbished to include a restaurant.) and the Castle Grounds, the Castle Tearooms and Ice Cream Kiosk, the Parkhouse Centre, which houses the Town Council and has letting rooms and the Ivor Potter Hall, which seats over 300 people, Bude-Stratton Museum, the Castle Tearooms and Ice Cream Kiosk, Summerlease Downs, including the grass tennis courts and the pitch and putt, the Triangle, Poughill Churchyard and

cemetery, Bencoolen Play area, Poughill Play area, Shalder Hill, including the War memorial and the Meteorological Station, Helebridge Barge Workshop, Maer Gardens and Stamford Hill Battlefield site which comprises a total of 30 acres of land

The Town Council also provides the decorative lighting along The Strand and in the Triangle; most of the flower planting around the town and at Rattenbury Gardens in Stratton; supply half the hanging baskets and maintain all the hanging baskets in the town – a total of over 160; The Town Council maintains public footpaths in Bude, Stratton and Poughill on behalf of Cornwall County Council

2.3 North Cornwall District Council

The North Cornwall district Council (NCDC) covers an area of 1,195 sq. kms, is home to 82,000 people in many isolated communities that are remote from facilities and services normally taken for granted in a more urban environment.

At a strategic level, NCDC is a key partner in the North Cornwall Local Strategic Partnership, a group of organisations representing the public, private and voluntary sectors that have produced the North Cornwall Community Strategy. The strategic vision of the partnership is, *"To create dynamic, vital and successful communities which will provide all current and future residents of North Cornwall with the opportunity to enjoy a good quality of life in a clean, safe and healthy environment."*

At an operational level, NCDC is committed to supporting community development and regeneration through specific and targeted assistance. NCDC's Forward Planning Team has compiled detailed statistics about parishes and wards providing information about the population, employment issues, health and the environment. They are also responsible for specific research, which can support community development. For example, a survey of community facilities across the district has recently been undertaken, which you can also find in this part of the site. The breakdowns from the 2001 Census are posted here too.

The Community Regeneration Team provides a diverse range of support to local communities, financially and through the provision of information, advice and guidance. This includes: supporting local community forums; promoting and advising local Parish Plan groups and market and coastal town partnerships; administering the North Cornwall Community Chest Fund providing financial support for local community projects and working with local schools to engage young people in community development. The team is also engaged with the North Cornwall Community Skills Group who promotes and delivers training for local people to help them to successfully work with their own communities. In addition local community transport projects and access to services are supported through the East Cornwall Rural Transport Partnership. More details of these initiatives can be found in the menu on the left.

The council's Coast and Countryside Service is involved in a wide range of duties relating to the conservation of the high quality environment of North Cornwall and they provide active support for local communities.

2.4 Cornwall County Council

The Cornwall County Council is currently responsible for Education (all state schools, but not tertiary colleges or higher education), Social Services, Highways (except trunk roads), Cornwall Fire Brigade, Trading Standards, Strategic Planning, Road Safety and Rights of Way. As described elsewhere, in 2009, the County Council will be replaced by a Unitary Authority.

2.4.1 Cornwall and Isles of Scilly Health and Wellbeing Board

The Cornwall and Isles of Scilly Health and Wellbeing Board was set up in December 2006. The aim of the Board is to promote and improve the health and well being of the people of Cornwall and the Isles of Scilly and to reduce local inequalities in health. Joint Chairs of the Board are Carol Tozer (Director of DASC) and Felicity Owen (Director of Public Health), other Board Member representatives include:

- Cornwall Strategic Partnership
- District Councils
- Isles of Scilly Council
- Health & Social Care Overview & Scrutiny Committee
- C&IOS Primary Care Trust
- Health Protection Agency
- Private and Voluntary Sectors
- Local Communities
- Cornwall Diversity Network

2.4.2 Cornwall's Health and Well Being Strategy:

On Monday 21st January 2008, the 2020 Health and Wellbeing Strategy for Cornwall and the Isles of Scilly (strategy for improving health and well being in Cornwall) was launched. The strategy sets tough targets for improvement by 2020, including:

- Ending child poverty
- Cutting levels of smoking
- Reducing levels of obesity in adults and children
- Safe and warm housing
- Maximising people's incomes

Developing the Strategy

41 consultations have taken place with local people over the past 2 years. Many different issues were raised in the consultations but some common themes emerged

about housing, health, youth facilities, leisure facilities, access to services, healthy eating and smoking.

The Strategy is defined as 'an exemplar of partnership working and for us to have gained agreement on these priorities, which are based on what local people said should be happening, across all the agencies in Cornwall and the Isles of Scilly is great news for local communities.'

The strategy has been published as a series of 13 high-impact cards, with each one featuring a key public health challenge. The 13 areas covered by the cards are:

- Healthy Workplaces
- Smoke Free C&IOS
- Access to Benefits
- Getting into Work
- Access to Leisure & Recreation
- Warm, Safe & Affordable Housing
- Food
- Emotional Health & Well-being
- Reduce Infant Deaths
- Safer, Stronger Communities
- Meeting the Needs of All our Communities – Getting Better Access to Services
- Sex, Drugs & Alcohol
- Environment

