## Public Document Pack

## Minutes

# Folkestone \& Hythe District and Parish Councils' Joint Committee 

| Held at: | Remote Meeting |
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| Date | Thursday, 18 November 2021 |
| Present | Councillors Graham Allison, Michael Boor, Peter Coe (In <br> place of Paul Thomas), Laszlo Dudas, Frank Hobbs, <br> Mrs Jennifer Hollingsbee, Roger Joyce, Terence Mullard <br> and Martin Sweeney |
| Apologies for Absence | Councillors Paul Thomas <br> Officers Present:Kate Clark (Case Officer - Committee Services), Ewan <br> Green (Director of Place), Jyotsna Leney (Health, <br> Wellbeing and Partnership Senior Specialist) and <br> Llywelyn Lloyd (Chief Planning Officer) |
| Others Present: | Karen Sharp (Programme Director, East Kent Health and <br> Care Partnership) |

13. Appointment of chairman

Proposed by Councillor Mrs Jenny Hollingsbee
Seconded by Councillor Martin Sweeny
RESOLVED:
That Councillor Frank Hobbs be appointed as Chairman for the meeting.
14. Declarations of interest

There were no declarations of interest.
15. Minutes

The minutes of the meeting held on 16 September 2021 were agreed. The Chairman's electronic signature will be added confirming approval.
16. Overview of changes to Health Services Architecture

A presentation was given to members by Ms Karen Sharp from East Kent Health and Care Partnership. The presentation is attached to these minutes.

Members comments and questions followed:

- Staffing, namely GPs in the area. The statistics for staffing across all levels is not good, recruitment is a problem, however the establishment of the Medical School in Canterbury will hopefully encourage students to settle in the East Kent area.
- Care Homes. Problems have occurred where patients are unable to be discharged from hospital wards due to the shortage of care staff. Approximately $10 \%$ of the care workforce could have been lost due to non-vaccinated staff.
- Kent and Medway Medical School in Canterbury. It is hoped this will attract students to this area who will then settle here. Councillor Hollingsbee advised that this Council is supporting one medical student. There is a need to work more closely with schools, looking at apprenticeships, working within the care system and hospitals, for example health and wellbeing; nursing; physiotherapy and medicine.
- It was noted that the whole industry needs to attract more men into nursing, health and care.
- Otterpool Park - this development will include state of the art medical facilities and proposal to provide keyworker housing. A comment made that it was hoped these facilities would not detract from other parts of the district at a GP level.
- A member mentioned an initiative of surveying residents with regard to health and wellbeing, how could Parish Councils integrate with East Kent Health? The Hythe and Romney Marsh Hubs may be able to offer support and signposting.
- Using the volunteer sectors for help, neighbourhood plans, health and welfare of population, profiling.

Ms Sharp ended the presentation and said how important it is to encourage young people to settle and work in the East Kent area, promotion of the area as a great place to live and work. Both Ms Sharp and Mrs Jyotsna Leney were keen to encourage members to forward any ideas they may have in promoting the district, taking into account the close proximity of the Medical School in Canterbury.

Members thanked both Ms Sharp and Mrs Leney for the informative presentation.

## 17. Place Plan

A presentation was given to members by the Director of Place, Mr Ewan Green and Chief Planning Officer, Mr Llywelyn Lloyd. The presentation is attached to these minutes.

Members noted there is a large amount of investment involved which has raised the hopes and aspirations of all. Mr Lloyd commented that the quality of planning applications has increased due to the Place Plan.

However, members did comment that more focus is needed on the Romney Marsh. Mr Green, said that whilst Folkestone has a pivotal role for the whole district, the Council recognised the important role of the Romney Marsh area. This is reflected in the Council's priorities. He went on to say that the Romney Marsh Partnership is in the process of producing an Action Plan for the Marsh aimed at taking forward a range of future projects, and not forgetting the Council's investment in the new business hub at Mountfield Road in New Romney and the proposed new visitor facilities and beach huts at Littlestone.
Also, members were advised that the Core Strategy, to be adopted, mentions plans for Lydd and Dungeness.

Overall members were very impressed with the Place Plan and thanked officers for their presentation.

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## Betłer Lives Together

## East Kent

Health and Care Partnership


## East Kent Health and Care Partnership

Karen Sharp
Programme Director

## East Kent

Health and Care Partnership

## Context

## - Health and Care Bill

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King's Fund, https://www.kingsfund.org.uk/blog/2021/07/making-sense-health-and-care-bill

- Integrated Care System (ICS)
- Place based partnerships


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## East Kent

Health and Care Partnership

## Structure

## Kent and Medway Integrated Care System (ICS)

Integrated Care Board
Integrated Care Partnership

Place-based Health and Care partnerships
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$\square$ Medway \& Swale

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East Kent
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Primary Care Networks (neighbourhoods)
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## East Kent

Health and Care Partnership

## Ambition

Collaborating as and ICS will help health and care organisations tackle complex challenges, including:
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improving the health of children and young people

- supporting people to stay well and independent
- acting sooner to help those with preventable conditions
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources


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## East Kent

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## Who are we?

A place-based partnership made up of:

- 17 primary care networks (PCNs) with 69 GP practices
- East Kent Hospitals University NHS Foundation Trust (acute trust)

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- Kent and Medway NHS and Social Care Partnership Trust (mental health trust)
- Kent Community Health NHS Foundation Trust (community trust)
- Kent County Council (KCC)
- District councils
- Healthwatch
- Voluntary and Community Sector representatives

Our ambition is to work together to deliver better health and wellbeing outcomes for the people of east Kent.
"care for people as people - bring public sector resources together"

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## East Kent

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## East Kent PCN Mapping



Canterbury North PCN - 49,350 patients
Clinical Director: Dr Ross Lindsay ross.lindsay@nhs.net

- Northgate Medical Practice
- Sturry Surgery
- Canterbury Health Centre
- The Old School Surgery


## Faversham PCN - 31,767 patients

Clinical Directors: Dr Shariq Lanker \& Dr Daniel Moore shariq.lanker@nhs.ne
danielmoore@nhs.net

- Faversham Medical Practice
- Newton Place Surgery

Herne Bay PCN - 40,998 patients
Clinical Directors: Dr Jeremy Carter jeremy.carter@nhs.net

- The Heron Medical Practice
- The Park Surgery

Whitstable PCN - 39,986
Clinical Director: Dr John Ribchester
john.ribchester@nhs.net

- Whitstable Medical Practice



## Deal \& Sandwich PCN - 48,215 patients

Slinical Director: Dr lan Sparrow
ian.sparrow@nhs.net

- St Richards Road
- The Cedars Surgery
- Manor Road, Deal
- Sandwich Medical Practice
- Balmoral Surgery


## Dover PCN - 40,790 patients

Clinical Director: Dr Sourja Chaudhuri sourjachaudhuri@nhs.net

- St James' Surgery
- The High Street Surgery
- Peter Street Surgery
- Buckland Medical Centre

Hythe, Lyminge, Cheriton \& Hawkinge PCN - 48,720 patients Clinical Director: Dr Aravinth Balachandran
abalachandran@nhs.net

- The White House

Hawkinge \& Elham Valley Practice

- Park Farm Surgery
- Oaklands Health Centre
- Central Surgery
- The Surgery, Lyminge
- New Lyminge Surgery

Total Health Excellence East PCN - 31,759 patients Clinical Director: Dr Julian Mead julianmead@nhs.net

- Aylesham Practice
- Lydden Surgery
- White Cliffs Medical Centre
- Pencester Surgery

Total Health Excellence West PCN - 29, 737 patients Clinical Director: Dr Tuan Nguyen
tuan.nguyen@nhs.net

- Guildhall Street Surgery
- Sandgate Surgery
- Manor Clinic
- The New Surgery

The Marsh PCN - 21, 370 patients
Clinical Director: Dr Neil Popplett
neil.poplett@nhs.net

- Church Lane Surgery

Orchard House

- Oak Hall Surgery
- Martello Medical Practice


## Better Lives Together

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The 3 community hubs set up during the Covid -19 pandemic are still operating and offer health and wellbeing support to vulnerable people across the District

- Folkestone Community Hub is being run by Age UK South Kent Coast (Folkestone offices)
- Hythe Community Hub is being run by Age UK Hythe \& Lyminge
- The hub in the Romney Marsh area is being run by the Romney Marsh Community Hub (previously known as the Romney Marsh Day Centre).


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© The hubs are in receipt of funding that enables them to continue to support people recovering from the $\rightarrow$ impacts of the pandemic, They support people in hardship with food and help with gas and electric bills. They provide advice and sign posting to mental health services, befriending to combat loneliness and isolation and continue to:

- Provide food for those not able to get or prepare it themselves
- Assist with the collection and delivery of food orders
- Collect and deliver medical supplies
- Offer someone to talk to for advice and reassurance

They aim to keep people well and reduce the burden on other sectors.

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## East Kent

Health and Care Partnershin

## Better Lives Together

## East Kent: Our context

## Better Lives Together

## East Kent

Health and Care Partnership

## Lives

## Our context


$\stackrel{\rightharpoonup}{\omega}$ Increasing demand for health and care services.

A diverse population including areas with high deprivation



Ageing and a growing local population

A range of workforce issues where, for example, recruitment and retention of staff is problematic with some services reporting high vacancy rates while in others, staff are spread too thinly.


A dispersed and diverse population needs ranging from communities living in the historic city of Canterbury, coastal and commuter towns, as well as many villages.


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## Our context

- COVID-19 - the unprecedented
- The normal winter pressures
external shock bringing intense and devastating pressure


## NHS winter pressures

We bring together a range of our commentary and analysis
to explore the reasons for the extreme pressure on health services this winter.
kingsfund.org.uk


- Vaccination programme roll out

- Restart programme - pressure to deliver on phase 1, 2 and 3
- Health inequalities - impact on demand and complexity

- Brexit and potential chaos on our roads
- Fuel crisis


## Better Lives Together

## East Kent

## Health and Care Partnership

## Lives

## Health in coastal communities

CMO Annual Report (2021) highlights four key underlying causes of the health challenges of coastal communities:
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. The pleasant environment attracts older, retired citizens to settle, who inevitably have more and
2. An oversupply of guest housing has led to Houses of Multiple Occupation which lead to concentrations of deprivation and ill health.
3. The sea is a benefit but also a barrier: attracting NHS and social care staff to peripheral areas is harder, catchment areas for health services are artificially foreshortened and transport is often limited, in turn limiting job opportunities.
4. Many coastal communities were created around a single industry such as tourism, or fishing, or port work that have since moved on, meaning work can often be scarce or seasonal.

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## Health in coastal communities

The report also highlights that, nationally there is a significant health service deficit in terms of recorded service standards, cancer indicators and emergency admissions in Doastal communities.
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$\stackrel{\rightharpoonup}{\sigma} h e ~ r e a s o n s ~ f o r ~ t h i s ~ a r e ~ u n c l e a r, ~ h o w e v e r ~ p o s s i b l e ~ e x p l a n a t i o n s ~ i n c l u d e ~ c h a l l e n g e s ~ w i t h ~$ the retention of medical workforce and access to services.

For example, despite coastal communities having an older and more deprived population, they have:

$14.6 \%$ fewer postgraduate medical trainees

$15 \%$ fewer consultants

$7.4 \%$ fewer nurses per patient.

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## Lives

## East Kent challenges

- Average life expectancy in Kent is 80 years and this is slightly higher in women than men. In Thanet there are people in wards who are dying over 10 years earlier than the Kent average - this is referred to as 'premature mortality'. it is avoidable, linked to deprivation and costly to the individuals themselves and results in an increase in demand on services.

Deprivation shows a wide range of variation with more of the population classified as deprived in east Kent ${ }^{\text {D }}$ than the rest of Kent.

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- The main cause of early death in eats Kent include circulatory disease, respiratory and cancer.
- Almost two thirds of the Kent population with the highest rates of premature deaths live in East Kent.
- Some of the electoral wards of Thanet are amongst the most deprived in England and other deprived areas include Dover, Folkestone, and Romney Marsh.
- 21\% of Thanet's population (LSOAs - Lower layer super output area) are living in the bottom 10 \% of the most deprived nationally.
- Not all premature deaths can be prevented however a considerable number can. Smoking, regular diets of poor quality food, alcohol intake coupled with stressful and injury prone lives stimulate premature aging and cause conditions that lead to a high demand on health services.
- There is a direct correlation between deprivation, unemployment, lifestyle choices and poor health outcomes.


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## Population Health Management

- A Population Health approach aims to:
- improve physical and mental health outcomes
- promote wellbeing and
- reduce health inequalities across an entire population
- This includes focusing on the wider determinants of health

- Population Health Management is a technique for local health and care partnerships to use data to design new models of proactive care and deliver improvements in health and wellbeing which make best use of the collective resources.


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## Governance

## Partnership Programme Board

(Chair: Niall Dickson)

Clinical Cabinet
(Co-chairs: Dr Rebecca Martin \& Dr Sadia Rashid)

Improvement Board
(Chair: Dr Sarah
Phillips)

Urgent Care Delivery Board
(Chair: Susan Acott)

PHM Place Leadership Group
(Co-chairs: Madeline Homer \& Dr Sarah

Phillips)

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Hythe, Lyminge, Cheriton \& Hawkinge PCN - 48,720 patlents Clinical Director: Dr Aravinth Balachandran
abalachandran@ nhs.net

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## Total Health Excellence East PCN - 31,759 patlents

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nell. poplett(onhs.net

- Church Lane Surgery
- Orchard House
- Oak Hall Surgery
- Martello Medical Practice

| PCN | Patients | PCN Link Worker | Clinical Director |
| :---: | :---: | :---: | :---: |
| Hythe, Lyminge, Cheriton \& Hawkinge PCN | 47,134 | Emily Baxter | Dr Aravinth Balachandran |
| Total Health Excellence East PCN | 32,680 | Heather Walker | Dr Julian Mead |
| Total Health Excellence West PCN | 31,852 | Heather Walker | Dr Tuan Nguyen |
| The Marsh PCN | 21,344 | Natalie Manuel | Dr Neil Popplett |

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## PLACE PLAN




WE MADE THAT


Folkestone \& Hythe $\square \left\lvert\, \begin{aligned} & \text { FOLKESTONE } \\ & \Gamma \\ & \text { AND HYTHE }\end{aligned}\right.$



## Why a Place Plan?



- Recognition of the significant change in the retail led economy
- Response to market research
- Basis for welcoming the right changes to our town
- Strategic coordination
- Positive promotion of the Town Centre
- Statutory requirement to plan for new homes
- Readiness for funding bids and other regeneration opportunities


## What is the Place Plan and what it is not?



It is.....

- A strategic driver for change
- A plan of action resulting from the different engagement with businesses, community and partners
- The starting point for more work, studies and project development
- A basis for the Council supporting other people's ideas, plans
- A basis for attracting funding support

It is not.

- The end of the conversation
- Fixed and the only scope for change


## The 'Brief'



- A collective vision for the Council, partners, stakeholders and community
- Recognise the town's inherent strengths and position Folkestone for the future
- Celebrating and building upon the great work and investment to date
- Identify the challenges, issues and the potential solutions
- Consider impacts of national policy
- Identify Funding Opportunities
- An Action Plan for Folkestone Town Centre


## Place Plan Brief



Some of the key themes to cover:

- Establishing a civic 'heart' \& purpose - "One public estate"
- Create a broader leisure offer 'for all' - creating more reasons to dwell in the town.
- Creating great animated public spaces for residents and visitors
- Foster a dynamic/flexible employment environment transitioning away from a solely retail lead economy
- Future town centre animation, markets, management and maintenance
- Investment/development opportunities - setting an ambition
- Encourage TC living as a vital component of a vibrant mixed use with an appropriate evening economy
- Deliver a shift in transport movements \& maximise accessibility
- Create an exemplar in sustainability and reap the benefits of compact growth
- Inform wider review of Licensing Policy
- Place branding and promotion


## Supporting study and appraisal activity

To inform the Place Plan document a series of appraisals and supporting
 documents were produced including:

Urban Appraisal
Socio-economic appraisal
Current use and operation of the town centre
Historic, assets and landmarks context

- Engagement plan

One to one engagements
Themed workshops
Public webinars
Focus groups
Supporting technical documents
Opportunity \& development sites
A vision of the possible
Potential Transport Initiatives
Current road network infrastructure
Recommended interventions for future projects

## Engagement

150 surveys and
email responses
Impact in numbers: one-to-ones \& workshops
46
one-to-one conversation
15 virtual workshops to discuss priorities and ambitions including young people
96
121 workstopoonticiononsteresidents community groups, businesses and stakeholders,
nclume 17
167
detailed
conversations
266
attended
public webinar events
459 youtube views
contacts
compiled

Impact in numbers: public webinars
95
survey results
266 attendees
322 questions asked


## Offline Engagement

- Your district today full page
- Posters in key sites (e.g.
supermarkets)
- Webinar slides and surveys provided in hardcopy


## How the Place Plan is structured

## The Grand Challenge

To overcome decline in Folkestone's town centre by embracing opportunity, addressing the climate emergency, celebrating what's already great and bringing the town's communities together


Actions to deliver the Missions


## Study Area

Primary focus is the Town Centre

- Considering the wider boundary as the Place Plan was developed


Place Plan for Folkestone Town Centre

## Action areas and content



## Station Arrival:

Station area design
1.1 Public realm upgrades \& upgrades to station arrival areas as a gateway into Folkestone
4.1 Mobility hub alongside train station: Potential
4.2 Overhaul of the legacy highway system: Cheriton
4.3 Wayfinding \& enhancing the cycling and walking experience:

- Cheriton Road, Cheriton Gardens
\& \& Castle Hill Avenue

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甲. 4 New and improved routes: Broadmead Road \& through Ship St linking to F51
4.6 Explore options for a bus link into the town


Place Plan for Folkestone Town Centre

## Bouverie Square and Middelburg Square design

1.6 Reinstating Bouverie Square as an arrival space and focal point
2.8 Future mixed use development opportunity: Saga Building \& NCP Car Park
2.9 Future mixed-use developmen opportunity: Post Office buildings \& Store 21
4.10 Improved gateway to the town centre including a new bus station layout
4.12 'Mobility Hub' with cycle hire and storage
4.13 Explore options to integrate cycling and skateboarding in the town centre (including skate- able landscaping)


Bouverie Square and Middelburg Square design


## Sandgate Road, Guildhall St and Shellons St design

1.3 Public realm and crossings improvements

### 1.4 Upgrades to Guildhall S $\dagger$

1.5 Public realm and greening to Sandgate Road and service areas
1.7 'Guildhall Square' new civic square
1.8 New Silver Screen/ Museum/ Town Council signage
2.4 'Town Lab' to test new uses,
$0_{0}$ experiment and try new ideas
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Relocate FHDC Customer Access Point
2.7 FOLCA building re-imagined
2.10 \& 2.11 Future mixed-use development opportunity
4.13 Explore options to integrate cycling and skateboarding in the town centre
5.6 Review free WiFI and digital provision


## PayersPark and

## F51 environs

## design

1.10 Public realm upgrades: The Cube, F5 1 and Payers Park
2.13 Hub of potential uses around Payers Park
3.4 Support Shepway Youth Hub with larger spaces
4.15 Redesign of road layout to improve all modes of travel and movement
4.17 Promote 'leisure loop' and other active routes as circuits around wider area
5.7 Expand on the offer of The Cube adult education centre and Grace Hill Library


Place Plan for Folkestone Town Centre

## Harbour Line/Tram Road design

1.17 Public realm upgrades to Harbour Street and exploring options for Tram Road car park to become a key public space potential for development to activate the space
4.21 Harbour Line/ Tram Road improvements


Place Plan for Folkestone Town Centre

## Community Impact

A number of the interventions highlighted in the Place
 Plan have an impact on our community including:

Direct impact

- FOLCA reimagined with delivery of health provision
- Relocation of Customer Access Point
- Community Hub / Skills Hub
® - Enterprise facilitation \& participation programmes
$\underset{\oplus}{\oplus}$ - A place to test new uses "The Lab"
- Build on and expand social initiatives (e.g. Shepway Youth Hub)
- More inclusive facilities (e.g. changing places toilets)
- Market improvement programme
- Design review panel

Indirect impact

- Public realm improvements
- Improved road networks
- Town centre living
- Mobility hub


## Next steps and Focus Areas



Consider feedback from final consultation
Cabinet for approval $22^{\text {nd }}$ September
Identify early intervention delivery programme

- Heritage Lighting \& Signage
- Coastal Park directional signage
- Folca reimagined (e.g. health provision)
- Community Hub/The Lab
- Market improvement programme

Ongoing engagement as projects develop

- Strategic partners
- Community/residents
- Local businesses

Through the process of developing the Place Plan, seven priority actions have been identified and foregrounded here.

These priority actions have also been influenced by the public engagement process.
-Station arrival and town centre connections (vital in
$D_{0}$ supporting the continued $\ddot{\circ}$ $\pm$ destination)
-Improved gateway to the town centre including a new bus station layout (will transform a vehicle dominated and neglected area)
-Sandgate Road town lab, public realm and 'Guildhall Square'(trialling of new ideas and innovation and civic pride)

-F51 environs and Payers Park (improved connectivity for all)
—Harbour Line/ Tram Road
(opportunities for improve links to town centre for local communities and visitors)
-Sunny Sands (improving natural assets for local communities and visitors)

## Delivery of Place Plan



It is recognised actions outlined in the plan are not solely the responsibility of the Council to deliver. There is however a clear leadership role for the Council to ensure that the overall ambition in the plan is pursued vigorously.

## The role of the Council

- Promote the plan to communities, partners, investors and government.

5 - Lead delivery of a range of actions across short, medium and longer timeframes.

- Support delivery of actions by partners in the public, private and community sectors.

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- Co-ordinate and report on overall delivery of the plan
- Continue to engage across all stakeholders and communities as part of the development of projects.



## Questions \& Answers

https://www.folkestone-hythe.gov.uk/folkestoneplaceplan

