

NOTE OF MEETING OF THE RED HOUSE FORUM MON 27 JULY 2015

1. PREAMBLE

Apart from one item – see under 'Community Asset' – this was an especially encouraging meeting. But first, pause and make a diary note of the next meeting of the Forum which will be held at Park Hall

9.30 Tuesday 13 October

2. COMMUNITY ASSET

Nicola Linacre reported that the St Albans City and District Council had refused the HTC request (dated 18 July 2013...) for the HMH site to be added to the list of community assets. The reasons given are: that much of the site is closed off and dangerous; that the current NHS usage concerns its county administration rather than local clinical needs; that it would be too costly to reboot the facility; and that the Stewart building is separate to and consists of only one quarter of the site.

David Law promised to advise the HCT Board, as the owners, with a view to a possible appeal,

(nb although the request has needed two years to evoke a response, the owners must seek a review within eight weeks of this notification.)

3. STRATEGIC REVIEW

David Law led a discussion of the implications of the on-going Herts NHS review. He listed the following background factors:

- a. The faltering attractions of medicine as a career – 25 % of GPs will retire from local practices in the next five years and recruitment is not keeping pace with these losses.
- b. A joint approach to delivering care remains problematic in terms of the links among different providers, especially in cases where more than one condition is evident. Where a patient is suffering from three or more conditions, the cost rises exponentially as a person's needs increase.
- c. Even among the older population the numbers of patients is actually small; at any one time 5% of the population account for roughly 40% of NHS and social care resources. For example, the treatment of diabetes, which affects 1.5% of the population, accounts for about 10% of NHS expenditure.
- d. The chief motif of hospital development in the Victorian age and later was the

treatment and cure of infectious diseases. The main issue today is dealing with long-term, often acute and incurable, conditions, for which the hospital mode is ill-suited.

e. The economic and allied political situation suggested that there would be over the next years a real decline in NHS funding. Cash is rising slightly but not keeping pace with demand.

In response to these factors, NHS were pioneering in the Watford area the concept of 'case managers' to navigate the patient through the choppy waters of multi-agency provision, while 'health coaching', whereby patients were advised how to self-manage, was being developed. It was believed that self-management was both more effective and less expensive than institutional treatment.

In general, David Law concluded that the concept of a health and well being hub in Harpenden would be a distinctive marker of this all-round and progressive approach to health care.

4. THE PROJECT TEAM

Members were reassured that the local CCG's seemingly cursory involvement in the Project Team would be righted, with the CCG having offered support to the plan and having made a fresh appointment as to its representation. In the meanwhile, background work on the scheme had continued unabated.

5. MENCAP

Patrick Fisher of Harpenden MENCAP spoke of his hopes that HCC Social Services would, despite protracted discussions, engage with the charity in terms of a likely development at the site, bringing a valued social benefit to some part of the land sold off to furnish funds for the health and well being campus. He urged the need, and in this he was supported by others, to accept the 'home for ;life' criteria which underpinned the lifetime needs initiative. It was indicated that talks were planned to discuss this element in the overall pattern.,

6. OPTIONS AND SERVICES

Diane Brent updated members on the progress made and inaugurated a useful discussion accordingly.

She reported that the Evaluation Group – and here she thanked Helen Clothier and Patrick Fisher of the Red House Forum for their helpful contribution thereto – had completed its work and that the long list of options had been reduced to two, namely

- refurbishment of the Stewarts building
- new building on brown field area

In one sense either would suit the main aim of the Red House Forum for the range of

services on offer would be the same whichever was chosen – and the choice would be largely based on financial considerations.

Several possible tenants and users, including Luton and Dunstable Hospital which has opted to use some spaces, have been approached and the response had been favourable. Many of the spaces will be generic; others will meet specific requirements. The general theme will be to find optimal usage of space over time.

Diane Brent has provided for comment a draft paper on the scale and range of suggested services. This will be forwarded privately to Forum members, for at the moment it has restricted status while internal consultation of this draft, including with the Red House Forum, is negotiated.

7. CONCLUSION

NHS officers indicated that at some mid-term point the Forum would be asked to assist with arrangements for making known the possibilities of the new venture with a view to asking the public for their suggestions and comments about how the local community might add to the utilisation of the refurbished/rebuilt Red House enterprise.

It was emphasised that because the cost of the project was not unduly high the plans would be submitted not to the full Trust Development Authority but to its subsidiary Finance Committee. David Law and Diane Brent remained confident that the project could be delivered within an acceptable time span, perhaps as early as 2017.

Eric Midwinter

Co-organiser Red House Forum