

Farm Terrace Allotment Group Meeting

19 September 2012

Held at Watford Town Hall

Present:

Lesley Palumbo (Chair) (LP)
Tom Dobrashian (TD)
Paul Rabbitts
Kathryn Robson (KR)

Head of Community Services
Programme Director
Parks and Open Spaces
Partnerships & Performance

Watford BC
Watford Health Campus
Watford BC
Watford BC

Kyle McClelland (KMcC)

Associate Director - Strategic Developments,
West Hertfordshire Hospitals NHS Trust

Farm Terrace Allotment Holders

Councillor Jagtar Singh Dhindsa
Councillor Mo Mills

Vicarage ward
Vicarage ward

1	Welcome, introductions and matters arising	Action
	<p>LP opened the meeting and welcomed those attending. She noted that there were a number of new members attending the meeting and, therefore, invited people to introduce themselves to the Group.</p> <p>LP welcomed Kyle McClelland from the West Hertfordshire Hospitals NHS Trust. She explained that Kyle was attending following a request from the Group at the previous meeting to provide a better understanding of the Hospital's future plans. She invited Kyle to address the Group and that questions could be asked as part of the agenda item.</p> <p>Councillor Dhindsa said that he had requested information relating to all allotment meetings. LP commented that the Allotment Stakeholder Panel was a borough wide meeting – i.e. covering all allotments across the borough and was focusing on very different issues from the Farm Terrace Group. KR said she thought Councillor Dhindsa had requested information relating to Farm Terrace meetings but noted his request.</p>	KR to note
2	Watford General Hospital – how its plans are progressing (Kyle McClelland)	
	KMcC took the Group through the Hospital's history in relation to the Health Campus. He referred back to very extensive consultation conducted in 2004/05 on the future of health provision in Hertfordshire. The outcome of this consultation had been the decision to locate a major hospital in Watford that would take 'blue light activity'. This had resulted in Hemel Hempstead and St Albans being designated as	

'local hospitals' – without an A&E department. The other major hospital in the county is the Lister at Stevenage. This means that the Lister has A & E facilities and that the 'QE2' in Welwyn is being 'down graded' and no longer provides A&E facilities.

The Trust launched a consultation called 'Delivering a Healthy Future in West Hertfordshire' in 2006 and this accelerated A&E moving to Watford as it was seen as essential for safe health care and delivery of a quality A&E service.

KMcC said that the Acute Admissions Unit (AAU) was opened in 2009 and this had doubled Watford General Hospital's A&E capacity. It provided the right level of service delivery for activity levels three years ago and for the projected levels of demand as forecast by the NHS – around a 2% growth year on year. However, 2010/11 saw a 12% growth in emergency admissions and 2012 is seeing around a 15% increase in emergency activity. The Trust Board responded to this unprecedented increase by building the AAU 'red suite' in late 2011, which comprises the portacabins on what was previously a car park. This ensured that the Trust met targets in terms of the time taken to deal with patients arriving in the A&E. It is now planning a further extension to ensure it can meet current demand – this will be a two storey building next to the 'red suite'. It will open later in the year.

KMcC explained that it was important for the Group to understand this history because it has had a critical influence on future plans for the Hospital. The location of the expanded A&E provision (i.e. where the portacabin extensions have been built) is part of the site that had been previously agreed for a new hospital. Given this, the Health Campus scheme now needs to identify where on the site a new Hospital could be built.

Councillor Mills asked whether there were plans for a new hospital. KMcC confirmed this was the case – although it would not be the single building that people had seen in previous plans.

The Group wondered if the capacity projections for the A&E service had taken population growth into account. KMcC said this had been the case – this had been part of the NHS' modelling. He also pointed out that the growth in population locally was not material in the wider context of the 500,000 population served by the Hospital. WHHT is not the only Trust experiencing unexpected increases in demand, although it is not happening uniformly across the country. The Trust would be looking into the factors behind the increase. The closure of the A&E at the QE2 has been thought to be a significant contributory factor.

An allotment holder asked whether the AAU was a temporary building. KMcC said the building had a modular design and a life of 60 years. He reiterated that the extensions had, by necessity, been located in space previously designated for new hospital facilities.

An allotment holder asked whether any decision had been made as to where the new hospital might be. KMcC and TD said that no decision had been made. All Kier's plans are still indicative and these are exploring what could be possible on the site.

Councillor Mills asked why the current buildings need to be pulled down – why could they not still be used if they were improved and refurbished. KMcC said that the Princess Michael of Kent building was 27 years old whilst the maternity unit is 50 years old and were not appropriate for 21st century health care.

KMcC commented that the NHS is evolving all the time and new ways of treating people are continually emerging. These have implications for the type of facilities needed and actually mean that fewer beds were now required than in the past.

The Group expressed concern that they had received confused messages about whether the Health Campus would mean a new Hospital would be built. KMcC

confirmed that the Health Campus scheme is not delivering a new hospital as had previously been planned and that the Trust could not, at present, produce a plan that would show the delivery of a new hospital. But the Trust is still working towards delivering a new hospital – but it would need to be in phases.

An allotment holder asked why build the Health Campus if it did not have a new hospital. TD explained that the Health Campus site was still the location for whatever new hospital facilities are to be delivered. It therefore has to take into account the needs of the Trust in terms of the Hospital – this ranges from getting the right infrastructure in place for the Hospital (i.e. the access road) to ensuring there is land allocated for the Trust's requirements – even if they cannot build on it yet.

LP summarised the discussion so far:

- KMcC had set out some of the pressures currently facing the Hospital and why the need for new facilities was so important to delivering good quality healthcare services
- WHHT is not yet in a position to say exactly how it will achieve its aim of building a new hospital but this remains its vision. It will be on the Health Campus site – but this will require a fully planned business case
- Although there is still work to be done, a new Hospital – in whatever form that is delivered – is a reality for Watford

An allotment holder asked how any new hospital facilities would be funded. People had been told that the PFI route was no longer available so is there money available?

KMcC said that the Hospital, like all NHS hospitals, is funded through taxation. The Trust has a budget for delivering healthcare services and this includes paying for buildings.

An allotment holder asked whether the Health Campus scheme, as it currently stands, helps fund the Hospital. TD said that it will provide some financial help.

TD explained what would be delivered for WHHT during the early phases of the Health Campus:

- New office block for its administrative staff. Current facilities are inefficient and preventing fully effective working
- Car park – a significant issue for the Hospital – the current staff car park is only temporary and so a multi-storey car park would help provide improved parking facilities
- New link/access road for emergency vehicles in particular – the bridge that takes the road over the Croxley Rail Link (CRL) is particularly important and needs to be completed in time to coordinate with the opening of CRL

Councillor Dhindsa asked about the profit model that is being agreed with Kier. His understanding is that only 50% of the profit would go to the public sector. TD said this was correct but that, in addition, the Trust is receiving enhanced land value for their land.

KMcC commented that for the Trust it would be remiss if the council did not consider

the allotments within the Health Campus scheme.

An allotment holder commented that he felt West Watford was suffering for the whole of west Hertfordshire.

The Group was keen to know what might be developed on the allotments – if they were used. TD and KMcC said it could be part of the Hospital. LP reminded the Group that this is the time in the Health Campus project when views needed to be taken on board from a number of stakeholders, including Farm Terrace.

An allotment holder asked why the allotments had not been needed in the past but are now. KMcC confirmed that, from the Trust's point of view, this was because of the expansion of the AAU on what had been the space previously allocated for the new hospital. However, it could be used for other Health Campus developments as well.

Concern was expressed about the density of population in West Watford and the amount of development that has taken place. KR confirmed that neither ward in West Watford had seen as much new housing developed as other areas over the last 10 years.

TD explained that much of the Health Campus was on a brownfield site - abandoned or underused industrial and commercial facilities – which is unattractive and basically wasted space in the borough. By using this as part of the scheme, the Health Campus will actually create more open, green space i.e. available for the whole community and that could support a range of flora and fauna.

The Group expressed frustration that they were not being told what is going to be built on the allotments and they could not see the benefits to the community if the allotments were lost. LP explained that the Health Campus partnership would have expected the Group to be unhappy if they had presented finalised plans to them and the wider community. The idea of establishing the Group at an early stage had been to take on board comments before there were final plans – to give the Group a chance to express its issues and concerns. This did have the problem of not being able to give definitive answers to the questions such as what is planned for the site but it was intended to provide a genuine opportunity for engagement.

TD said the Health Campus team is now working with Kier on deliverable options.

An allotment holder asked where the access road was planned. KMcC was able to give some idea through previous plans that he had but the Group was advised this was another element that was currently being looked at and the final route had not been agreed.

Another allotment holder asked when the issue of the allotments got raised as part of the project. TD said that it had really been an issue since March 2012. Two of the three developers who were still involved with the scheme at this time had clearly indicated that they might be needed to make the scheme viable and so this had had to be taken into account. TD said the allotments had always been included as part of the description of the site in terms of what buildings / land etc are included or not included. At the commencement of the procurement for a private sector partner, the allotments were excluded. Once feedback indicated that they might be required for alternative uses, the potential preferred bidders were asked to consider the scheme both with and without them and what the implications would be.

Councillor Dhindsa said that the Labour group is not against the Hospital but it also wants to keep the allotments. It was concerned about the amount of housing being planned. TD said the initial planning application for the site was for 500 homes.

	<p>An allotment holder asked why the Hospital expansion could not be accommodated on the brownfield area of the site. TD said that there were a number of issues still to be resolved with regard to the brownfield site (which is around Cardiff Road) and what it might be suitable for but the Hospital needed to expand within an area that kept it working efficiently. KMcC commented that, for example, a new maternity unit has to be close to surgical facilities – there needs to be speedy access for obvious reasons.</p> <p>LP commented that the discussions so far illustrated that the Health Campus scheme has to meet many needs and that the economic viability of the scheme is also important. All this will have to be considered within the masterplan that Kier is tasked with developing.</p>	
3	Update on issues identified by Group	
	<p>Sustainability / Environmental issues</p> <p>An allotment holder said she felt the intrinsic value of the allotments was not being appreciated. She was concerned about the loss of biodiversity in the area.</p> <p>TD commented that there was clearly an emerging stakeholder group with an interest in sustainability issues. In view of this he was suggesting a sustainability workshop in October. Two representatives from the Farm Terrace Group would be welcome at the workshop – two allotment holders volunteered and their names were noted</p> <p>He advised the Group that they could view the Equality Impact Assessment. Link as below: http://www.watford.gov.uk/ccm/content/strategic-services/watford-health-campus/watford-health-campus.en</p> <p>Impact of Health Campus scheme on allotments</p> <p>An allotment holder asked that if the allotments were included in the scheme when would they 'go'. TD said that although no decision had been made it was likely to be the end of 2014 in terms of what is currently known about the scheme's phasing.</p> <p>Another allotment holder asked if the road into the site would be the only access to the Hospital. KMcC said it would be the main route in. The allotment holder expressed concern with regard to smog / pollution impacting on the allotments. She wondered if the allotments would still be viable.</p> <p>The Group asked for clarification whether different options are still being looked at for the allotments – i.e. the 0%, 50% and 100% options for the use of allotments within the scheme. TD said that the Health Campus partnership is working through the issues with Kier – what is viable and what the scheme might look like.</p> <p>The Group asked what alternatives had been considered for Farm Terrace allotment holders if they did have to move. LP said that this did need looking at and asked whether the Group wanted to discuss it at the next meeting. Although allotment holders were concerned about considering relocation they thought discussions would be helpful.</p>	<p>KR to note</p> <p>KR to note</p>

	<p>An allotment holder asked when Cabinet would be receiving a report on the Health Campus. TD said a progress report would be presented for the November meeting but this would not involve the final decision on the allotments.</p> <p>Engagement and Communications</p> <p>Some allotment holders expressed frustration with the Group meetings. As Chair, LP asked the Group if they felt the meetings were worth continuing. They had been set up to enable Farm Terrace allotment holders to feed their views into the development of the plans for the Health Campus. If people still felt they wanted this opportunity, LP suggested that the meeting currently scheduled as a joint meeting with the Allotment Stakeholder Panel on 10 October 2012 be redesignated as a meeting for the Farm Terrace Group.</p> <p>The Group agreed to the change to the meeting on 10 October.</p> <p>An allotment holder said that the Farm Terrace allotment holders wanted an open and honest debate.</p> <p>All allotment holders felt that they would want to see a real effort being made to look at alternatives to using the allotment site. They asked if they could contribute to the process of developing the masterplan – direct input so that they could help sort out the ‘jigsaw’.</p> <p>LP and TD said that the 10 October meeting could be arranged to provide an opportunity for the Group to be presented with an overview of the site and all the needs that have to be considered for the scheme. Farm Terrace allotment holders could put forward their solutions / alternatives for how these needs can be met and how all requirements can be accommodated on the site.</p> <p><i>Post meeting note: due to unavailability of the masterplanner who has been assisting the council, this meeting will need to be moved to 11 October.</i></p> <p>The Group agreed this would be helpful.</p> <p>LP and TD pointed out that the date would need to be confirmed with the Group as it would be dependent on who was available to run the workshop.</p>	<p>KR to note/ All to note</p> <p>LP / TD to note</p> <p>KR to note and confirm date with Group as soon as confirmed.</p>
4	Next meeting	
	11 October 2012 – 7.00pm – Watford Town Hall – details to be circulated	